OFFICE OF APPLIED STUDIES

Mortality Data from the Drug Abuse Warning Network, 2000

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
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HIGHLIGHTS

ortality Data from the Drug Abuse Warning Network, 2000 provides information on drug-induced and drug-related deaths identified and submitted by participating death investigation jurisdictions across the United States. The Office of Applied Studies (OAS) of the Substance Abuse and Mental Health Services

Administration (SAMHSA) is responsible for the operation of DAWN. Drug abuse deaths described in this document do not represent the Nation as a whole, nor do they necessarily represent the total number of deaths in which drug abuse was a causal or contributing factor in any given metropolitan area. Rather, DAWN cases reflect the number of drug abuse deaths reviewed, identified, and reported by participating medical examiners and coroners in selected metropolitan areas. These data can be used to monitor changes over time.

In 2000, 137 jurisdictions in 43 metropolitan areas submitted data to DAWN. The 43 metropolitan areas range in size from Casper, WY (population 66,533) to Los Angeles (population 9,519,338). Likewise, there was a wide range across metropolitan areas in the number of deaths reviewed by participating medical examiners and coroners. Within metropolitan areas, participating jurisdictions identified between 1 and 1,192 drug abuse related deaths in 2000; DAWN-reportable deaths accounted for 1 to 19 percent of all deaths reviewed.

A total of 36 metropolitan areas reported at least 30 drug abuse deaths in 2000. Full "metropolitan area profiles" are provided for each of these areas. These profiles include a number of tables that together show the number and characteristics of drug-related deaths reported to DAWN, along with recent trends among participating jurisdictions.

Some metropolitan areas saw substantial changes in the number of drug abuse cases from 1999 to 2000. Notably, Louisville reported a 76 percent increase in cases in 2000 compared to 1999 (from 61 to 109), while drug abuse cases in Wilmington (DE) increased 74 percent (from 31 to 54). Other cities reporting substantially more cases in 2000 than in 1999 include: Omaha (a 48% increase), Birmingham (41%), Miami (29%), and New York (27%). Conversely, facilities in Los Angeles reported 36 percent fewer drug abuse deaths in 2000 compared to 1999 (1,887 versus 1,192), while facilities in Buffalo reported 16 percent fewer DAWN cases in 2000 (89 versus 106 in 1999).

Characteristics of Drug-Related Deaths

In every metropolitan area, men constituted more than half of all DAWN cases, ranging from 63 percent of drug abuse deaths in Norfolk to 86 percent of drug deaths in Providence. Drug abuse deaths among adolescents and young adults were relatively rare. Decedents under age 25 accounted for fewer than 20 percent of DAWN cases across all metropolitan areas. Decedents under age 25 accounted for fewer than 10 percent of all drug abuse deaths in about half of the participating areas. In contrast, decedents over the age of 45 accounted for more than one-third of all drug abuse deaths in 20 cities, ranging as high as 50 percent of all DAWN cases (Cleveland). Readers should note that DAWN collects data only on decedents between the ages of 6 and 97.

DAWN collects data on both drug-induced and drug-related deaths. In 30 cities, drug-induced (overdose) deaths accounted for more than half of all deaths reported to DAWN. However, deaths reported to DAWN are not limited to drug overdoses. Participating jurisdictions are also asked to report the number of deaths in which drug abuse was a

contributing factor, but not the direct cause of death. In 6 metropolitan areas—Buffalo, Kansas City, Louisville, Omaha, St. Louis, and Wilmington—reported deaths were more commonly classified as drug-related than drug-induced.

In the average metropolitan area, 17 percent of all drug abuse deaths were ruled as suicides, while 53 percent were ruled accidental and 30 percent were due to undetermined or other causes. The proportion of suicide deaths ranged from 3 percent of drug abuse deaths in Providence to 32 percent of drug abuse deaths in both Omaha and Birmingham. Other cities in which more than one-quarter of drug abuse deaths were determined to be suicides were Louisville (30%), Phoenix (29%), Oklahoma City (29%), Minneapolis-St. Paul (27%), and Las Vegas (27%). There was no single drug that accounted for the majority of suicide deaths, although cocaine (both alone and in combination with alcohol) tended to be mentioned most frequently in suicide cases.

Drug Combination Patterns

Because up to 6 drugs can be mentioned in conjunction with a reportable case, the number of drug "mentions" always exceeds the number of deaths. When multiple drugs are involved in a single case, the cause of death cannot be attributed to any particular substance. To facilitate interpretation of the data, tables produced for each of the participating metropolitan areas differentiate those deaths involving only one drug (termed "single-drug" deaths) and those involving more ("multiple-drug" deaths). Participating areas reported, on average, that only 25 percent of all deaths involved a single drug. All other deaths, ranging from 46 percent in Wilmington to 92 percent in Norfolk, involved 2 or more substances.

The most common drug combinations reported to DAWN were: alcohol and cocaine; alcohol and heroin/morphine; cocaine and heroin/morphine; alcohol, cocaine, and heroin/morphine; heroin/morphine and other narcotic analgesics; alcohol, heroin/morphine, and other narcotic analgesics; and amphetamine and methamphetamine. The number of cases involving these combinations varied across participating metropolitan areas, and many other combinations were reported.

The tendency for deaths to involve multiple drugs was noted even among those involving heroin/morphine and cocaine. Across cities, more than 8 out of 10 deaths (86%) involving heroin/morphine also had mentions of at least one other drug, while more than 7 out of 10 deaths (78%) involving cocaine also had mentions of at least one other drug. Narcotic analgesics, which include substances such as methadone, codeine, oxycodone, and hydrocodone, were nearly always mentioned in conjunction with other drugs. Across cities, 9 out of 10 deaths (92%) involving narcotic analgesics were multiple-drug deaths. In other words, these substances were rarely the sole and direct cause of death in cases reported.

Major Drugs of Abuse

As in prior years, the typical DAWN case involved between 2 and 4 different drugs. Although hundreds of individual drugs were mentioned in DAWN case reports, 3 drugs accounted for the vast majority of mentions. In nearly every participating metropolitan area, heroin, cocaine, and alcohol (in combination with other drugs) were the 3 most frequently mentioned drugs in reported cases. In 22 cities, these 3 drugs accounted for 40 percent or more of all mentions. They accounted for the vast majority of all drug mentions in reported cases in Newark (66%), Portland (67%), and Chicago (74%).

There were some notable changes across participating metropolitan areas in heroin/morphine, cocaine, and alcohol-in-combination mentions. In 2000, 12 metropolitan areas represented in DAWN saw a decrease in the number of heroin/morphine mentions, while 13 metropolitan areas reported more heroin/morphine mentions than last year. Likewise, 12 cities reported a decrease in the frequency of cocaine involvement in drug abuse deaths, while 11 cities saw an overall increase in cocaine relative to 1999. Across the participating metropolitan areas, alcohol was involved in an average of 35 percent of all drug abuse deaths. In 3 cities (Minneapolis, Baltimore, and Norfolk), alcohol was involved in more than half of all DAWN cases.

Other Drugs of Abuse

Only 3 metropolitan areas had a drug other than heroin/morphine, cocaine, or alcohol-in-combination as the most frequently mentioned substance in their DAWN cases. Oklahoma City's most common drug mention was methamphetamine (56 of 376 total mentions); Louisville's most common drug was cannabis (45 of 388 total mentions); and in Providence, the most frequently mentioned substance was unspecified narcotic analgesics (24 of 70 drug mentions).

Marijuana was reported in a number of cases, but at a much lower frequency than the 3 major drugs of abuse described above. Metropolitan areas reporting the largest number of marijuana mentions included Detroit (98 mentions), Dallas (75), St. Louis (51), and Kansas City (56). Marijuana is very often reported in combination with other substances; the average metropolitan area reported that 82 percent of all deaths involving marijuana also involved at least one other substance. Importantly, some jurisdictions do not conduct toxicology tests for the presence of marijuana and do not report marijuana to DAWN. The full extent of the under-reporting of marijuana to DAWN is unknown.

Methamphetamine continues to be geographically concentrated in the Midwest and West. Metropolitan areas reporting the most methamphetamine mentions were Los Angeles (155 mentions), San Diego (112), Phoenix (109), Oklahoma City (56), Las Vegas (49), and San Francisco (45). Twenty metropolitan areas reported fewer than 5 methamphetamine mentions. The only East Coast area reporting more than a few methamphetamine mentions was Long Island (38). Among metropolitan areas reporting any methamphetamine mentions, the drug was reported to have been used in combination with at least one other drug in almost 9 out of 10 (89%) cases.

Club Drugs

The DAWN metropolitan area summary tables include information on "club drugs" as a group, combining all mentions of methylenedioxymethamphetamine (MDMA or Ecstasy), Ketamine, gamma hydroxy butyrate (GHB) and its precursor gamma butyrolactone (GBL), and flunitrazepam (Rohypnol). As in prior years, these substances together accounted for very few deaths in any of the DAWN metropolitan areas. Only 10 cities reported more than 5 mentions of club drugs; the cities with the most mentions were Los Angeles (27 mentions), Dallas (10), Chicago (9), and Miami (9). In nearly all cases, club drugs were reported in combination with at least one other substance.

Abuse of Prescription and Over-the-Counter Substances

Participating jurisdictions reported a number of prescription and over-the-counter drugs involved in drug abuse deaths; most were benzodiazepines or narcotic analgesics. The following substances ranked among the 10 most common drugs reported in at least 15 cities:

- Diazepam (a benzodiazepine) ranked among the top 10 drugs mentioned in 26 cities, including Detroit (111 mentions), Philadelphia (87), Los Angeles (57), Phoenix (56), and Dallas (55).
- Methadone ranked in the top 10 in 19 cities, including New York (146 mentions), Phoenix (47), and Chicago (46).
- Codeine ranked in the top 10 drugs mentioned in 17 cities, including Philadelphia (216 mentions), Los Angeles (201), Phoenix (124), Detroit (103), San Francisco (92), and Chicago (88).
- Hydrocodone ranked among the 10 most common drugs in 15 cities, including Los Angeles (80 mentions),
 Detroit (48), Dallas (25), Oklahoma City (22), and San Diego (22).
- Oxycodone was ranked among the 10 most common drugs in 15 cities, including Philadelphia (87 mentions), Las Vegas (27), and Boston (21).
- Diphenhydramine¹ ranked in the top 10 in 21 cities, notably Los Angeles (77 mentions), Phoenix (65),
 Philadelphia (62), Detroit (56), and Dallas (55).

¹ Diphenhydramine is neither a benzodiazepine nor a narcotic analgesic. It is classified in DAWN under miscellaneous anxiolytics, sedatives, and hypnotics.

INTRODUCTION

his publication presents information on drug abuse-related deaths collected through the Drug Abuse Warning Network (DAWN) for calendar year 2000. DAWN is an ongoing, national data system that collects information on drug-related deaths from participating medical examiners and coroners. DAWN also collects information on drug-related visits to emergency departments from a national sample of hospitals. The Office of Applied Studies (OAS) of the Substance Abuse and Mental Health Services Administration (SAMHSA) has been responsible for DAWN operations since 1992.

Except for a few modifications to the emergency department sample in the mid-1980s, DAWN has changed little since its inception by the Drug Enforcement Administration (DEA) in the early 1970s. In late 1997, OAS began a comprehensive assessment of DAWN's design in response to concerns about uses and limitations of DAWN data. An independent evaluation of DAWN was undertaken in 1999, and recommendations for an alternative design were delivered in 2001. This assessment has motivated many recent changes to the content and operation of the DAWN system, as well as to the data and information available from DAWN, and many more changes are expected over the coming years.

OAS receives many comments and requests for specific information from potential and actual consumers of information from DAWN. We view these requests as expressions of the need to improve the content of DAWN publications. Therefore, the types of information needed and the problems consumers have experienced in locating that information have guided our thinking about new content and methods of dissemination. For example, we recently initiated a new series of short publications called *The DAWN Report*. The inaugural issue of *The DAWN Report* focused on club drugs, a topic chosen because of the large volume of requests for information on this emerging drug problem.² Those requests arose because of the absence of such information from the standard DAWN publications. *The DAWN Report* on club drugs combined both morbidity (emergency department) and mortality data to assess changes in the number of adverse health consequences resulting from the use of those substances.

This report—*Mortality Data from the Drug Abuse Warning Network, 2000*—marks a major change to the presentation of DAWN medical examiner data. It replaces the previous *DAWN Annual Medical Examiner Data* reports with a new design and a new title. The change in title reflects the fact that data on drug-related deaths are collected from a variety of jurisdictions, including medical examiners, coroners, and other death investigation systems. While the data may originate from different sources, all of the information is about drug-related mortality. *Mortality Data from DAWN* will be published on an annual basis, detailing data collected in the previous calendar year.

Mortality Data from DAWN, 2000 introduces major changes in format and content that are designed to provide more information about the metropolitan statistical areas (MSAs) represented in DAWN and their component jurisdictions. These changes have been made in response to feedback from DAWN consumers, as well as to resolve common misinterpretations of DAWN data that resulted, in part, from the manner in which data were previously displayed.

Other less obvious but equally important changes have been made to the method by which drugs are coded and classified in DAWN. DAWN relies on a detailed "drug vocabulary" to categorize the thousands of substances that are

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² Issues of *The DAWN Report* are available online at http://www.samhsa.gov/oas/dawn.htm.

reported each year. The drug vocabulary is, quite literally, the language—the codes and terminology—that DAWN uses to record and classify drugs and other substances involved in emergency department visits and deaths. It was necessary to implement substantial changes to the existing vocabulary to ensure that reported substances are accurately and consistently classified. The overhaul and replacement of the DAWN drug vocabulary has been described in detail elsewhere.³

In the next section, we describe the sources and methods used in collecting data for DAWN, and highlight certain limitations of the data. We then provide an overview of the new report layout, including a detailed description of each new table and its proper interpretation. Subsequent chapters provide DAWN mortality data for each participating metropolitan area and for selected counties.

Data Collection Procedures

DAWN is an ongoing drug abuse data collection system. The major objectives of the system include the following:

- To identify substances associated with drug abuse deaths that are reported by participating jurisdictions;
- To monitor drug abuse patterns and trends and to detect new drugs of abuse and new drug combinations;
- To assess adverse health outcomes associated with drug abuse; and
- To provide data for national, state, and local drug abuse policy and program planning.

Case Criteria

To be reported to DAWN, a case must involve a decedent between the ages of 6 and 97, and must meet all of the following criteria:

- The death was drug-induced (i.e., one or more drugs directly caused the death) or drug-related (i.e., drug abuse was a contributing factor in the death);
- The death was caused by or related to drug abuse—that is, the use of an illegal drug or the nonmedical use of a legal drug; and
- The decedent used the substance due to dependence, to commit suicide, or to achieve psychic effects.

Nonmedical uses of legal drugs include the use of prescription drugs in a manner inconsistent with acceptable medical practice, or the use of over-the-counter (OTC) drugs contrary to approved labeling or indications for specific physiological conditions (e.g., diabetes, heart disease).

Deaths involving the following circumstances are not reportable to DAWN:

- Drug abuse that is unrelated to the death (e.g., a history of drug abuse when no drugs were detected in the decedent's system);
- Accidental ingestion or inhalation of a substance with no intent to abuse it;

³ See Emergency Department Trends from DAWN, Preliminary Estimates January-June 2001. The classification of drugs currently in use by DAWN is derived from the Multum Lexicon, Copyright © 2001, Multum Information Services, Inc. The classification has been modified to meet DAWN's unique requirements (2001). The Multum Licensing Agreement governing use of the Lexicon is provided in an appendix to the ED Trends report and can be found on the Internet at http://www.multum.com.

- Adverse reactions to prescription or OTC medications taken as prescribed or labeled;
- Noncompliance cases in which an individual took less or accidentally took more medication than prescribed or directed by label instructions; and
- Drug consumption to conceal substances from law enforcement and avoid arrest.

These criteria mean that DAWN does not include any deaths in which the decedent had not personally used a drug. For example, an individual who dies in a drive-by shooting associated with drug-related activity, or a pedestrian who is struck and killed by a driver under the influence of methamphetamine might be considered "drug-related deaths" in terms of broader policy issues, but those cases are not reportable to DAWN unless the decedents themselves had been abusing a reportable substance at the time of their deaths. DAWN also excludes deaths by homicide.

For each case that is determined to meet the reportability criteria described above, the facility's designated DAWN reporter completes an electronic or paper form to document the following information:

- Date of death;
- Demographic characteristics (gender, age, race/ethnicity);
- Cause of death (i.e., whether the death was drug-induced or drug-related);
- For drug-related cases, whether the drug abuse combined with a physiological condition or external physical
 event or caused a medical disorder that resulted in death; and whether the relationship of the drug abuse to
 the death was confirmed or presumed (see Glossary);
- The manner of death (accidental, suicide, undetermined, natural);
- Whether alcohol was involved (in the presence of at least one other drug);
- The specific drug(s) involved; and
- The route of administration for each drug (oral, injection, inhalation, smoked, snorted, other, unknown).

Report forms for each case are then transmitted to the central data collection office for processing.⁴ The DAWN case report form is included in **Appendix A**.

A number of quality control procedures are used to ensure that DAWN data are as accurate and methodologically consistent as possible. These procedures include the following:

- Training personnel responsible for collecting the data in participating facilities;
- Providing printed and on-line manuals and other materials that specify data collection methods, definitions, and requirements;
- Monitoring reporting practices and problem resolution by a staff of traveling field liaisons;
- In-house manual editing of paper data collection forms, and automated error-checks for electronic data collection forms, with followup to resolve problems; and
- Periodic "reabstracting" studies at participating facilities to assess the accuracy and completeness of reporting.

⁴ As of mid-2001, about half of the participating facilities were submitting data on paper forms, while the remainder had been converted to an Internet-based reporting system called eMERS, the electronic Medical Examiner Reporting System. Full conversion to electronic reporting is expected within the next 2 years and should speed data processing and improve the accuracy of data submitted.

Data Limitations

DAWN data are gathered from medical examiners, coroners, and other death investigation jurisdictions. Not all deaths are reviewed by these facilities. In fact, it has been estimated that only about 20 percent of all deaths are reviewed by a medical examiner or coroner.⁵ However, given state and local statutes establishing jurisdiction over death investigations, it is likely that most drug-related deaths are reviewed by jurisdictions eligible for inclusion in DAWN.

Participation in DAWN is voluntary, and there are minor variations in the number of participants from year to year. Participating death investigation jurisdictions are not the result of a statistical sample. Therefore, counts of drug-related deaths do not represent the Nation as a whole, nor do they represent any metropolitan area with less than full participation. This limitation has led to misinterpretations of the DAWN mortality data in the past. Previous DAWN publications contained this warning, yet they also provided aggregated totals for the entire DAWN system. Those totals were often misinterpreted as national estimates. Likewise, metropolitan area "totals" were also misinterpreted as being representative of the entire MSA, or as being comparable from one MSA to another.

This new format seeks to avoid these problems of interpretation by providing data only at the metropolitan area level, and by clearly showing the degree of participation within each MSA. Unlike past reports, *Mortality Data from DAWN 2000* does not include any system-wide summaries, either in the text or in tables. Each metropolitan area is presented separately, with participating and nonparticipating jurisdictions clearly listed. This is intended to discourage aggregation of data across MSAs and direct comparison between MSAs. Population data are provided so that consumers may understand the context of any comparisons they choose to make, either within or across MSAs (e.g., 2 counties may have reported the same number of drug-related deaths, but they may have vastly different populations).

DAWN collects information about only those drug abuse episodes that have resulted in a death and, subsequently, have been identified and reported as drug-induced or drug-related by a participating facility. Although standard instruction manuals and training are provided to each DAWN reporter, the specific methods and procedures used to identify drug abuse deaths and the drugs involved may vary from facility to facility. For example, some jurisdictions may report cases involving circumstantial evidence; others may report only drug abuse deaths confirmed through toxicological analyses.

Cases reported to DAWN may have multiple drug mentions. Up to 6 different substances can be recorded for each reportable case, and the typical case in recent years has involved between 2 and 4 drugs. Alcohol is reported in a separate field, but only when at least one other reportable drug was recorded. DAWN does not capture information on deaths in which alcohol is the only substance involved. In addition, it is likely that some number of abused substances go undetected and, thus, unreported.

DAWN data are extracted from source records—death investigation case files—which may vary in the specificity with which particular drugs are documented. A drug may be documented by brand (trade) name, by generic name, by chemical name, by street name, as a metabolite, or as a nonspecific term. The level of specificity sometimes depends on the testing protocols used in death investigations. Drug data submitted to DAWN contain the terms used in the source

⁵ More information on death investigation statutes and procedures is available from the Centers for Disease Control and Prevention's Medical Examiner and Coroner Information Sharing Project homepage, at http://www.cdc.gov/epo/dphsi/mecisp/index.htm.

record at whatever level of detail is available. After receipt of the data, drugs are recoded into generic categories and duplicate entries are eliminated. Because of the variation in the raw drug data from source records, DAWN data on individual brands are deemed unreliable and are not published.

Each DAWN case represents an individual decedent. However, because multiple drugs can be, and typically are, reported, the number of drug mentions will always exceed the number of cases reported to DAWN. In addition, DAWN cases include both drug-induced and drug-related deaths. As a result, readers should not assume that any given substance was, by itself, the cause of death. To address this issue, several tables provide separate entries for single-drug deaths (deaths in which only one drug was involved), drug-induced deaths, and various drug combinations.

In some instances, information about deaths related to drug abuse is reported some time after the death occurred. Reporting delays are common because death investigations are often lengthy and involved. Reporters may have to await the results of autopsies and laboratory tests to determine that a death involved drug abuse. This publication was prepared with data for deaths that occurred in 2000 and were submitted by the end of August 2001.

How to Use This Publication

Mortality Data from DAWN, 2000 provides information on drug-induced and drug-related deaths identified and submitted by participating death investigation jurisdictions across the United States. In 2000, 137 jurisdictions in 43 metropolitan areas submitted data to DAWN. In this publication, tabulations of data are displayed for each of these metropolitan areas, and for selected large counties within those areas.

Metropolitan Statistical Area (MSA) definitions used in DAWN are consistent with those established by the Office of Management and Budget (OMB) and used in tabulating data from the decennial Census. Death investigation jurisdictions tend to be consistent with county borders, whereas MSAs often comprise multiple counties and, therefore, multiple death investigation jurisdictions. We use the term "jurisdiction" synonymously with "county" to reflect the fact that data are requested and reported at the county level, regardless of the actual jurisdiction boundaries. (See Glossary.)

Table 1 lists each of the MSAs represented in DAWN, the total number of death investigation jurisdictions (counties) in each MSA, the number and percentage of counties for which data were reported to DAWN for at least 10 months in 2000, and the proportion of the MSA's total population that is covered by DAWN-participating jurisdictions (counties). Information on jurisdiction coverage is provided to emphasize the fact that most of the metropolitan areas are not fully represented in DAWN. Information about population coverage is important because it shows that, although jurisdiction coverage is incomplete in most areas, the most populous counties are often represented. For example, Table 1 shows that although only 6 (30%) of the 20 counties in the Atlanta MSA participated in DAWN in 2000, those 6 counties are home to fully 70 percent of the metropolitan area's total population. An awareness of the extent of DAWN's coverage within a given MSA should provide the reader a better perspective on what DAWN represents.

The following changes in participation and reporting from prior years are notable.

The Milwaukee MSA previously included data from only Waukesha County. Milwaukee County began participating in DAWN in early 2000 and is included in this report.

Table 1. Overview of Participation in DAWN, 2000

	Total jurisdictions	1	ting jurisdictions counties)	% MSA population in participating	
Metropolitan area	(counties)	N	% of total	jurisdictions	
Atlanta, GA	20	6	30%	70%	
Baltimore, MD	7	7	100%	100%	
Birmingham, AL	4	1	25%	72%	
Boston, MA	7	5	71%	76%	
Boulder, CO	1	1	100%	100%	
Buffalo, NY	2	2	100%	100%	
Casper, WY	1	1	100%	100%	
Chicago, IL	9	5	56%	92%	
Cleveland, OH	6	1	17%	62%	
Dallas, TX	8	6	75%	96%	
Denver, CO	5	5	100%	100%	
Detroit, MI	6	4	67%	95%	
argo, ND	2	2	100%	100%	
ndianapolis, IN	9	2	22%	61%	
Kansas City, MO-KS	11	1	9%	37%	
as Vegas, NV	3	1	33%	88%	
ong Island, NY	2	2	100%	100%	
os Angeles, CA	1	1	100%	100%	
ouisville, KY	7	1	14%	68%	
Manchester-Nashua, NH	1	1	100%	100%	
Лiami, FL	1	1	100%	100%	
Middlesex-Somerset, NJ	3	1	33%	25%	
Лilwaukee, WI	4	2	50%	87%	
Minneapolis-St. Paul, MN	13	9	69%	84%	
New Orleans, LA	8	5	63%	93%	
New York, NY	8	6	75%	87%	
Newark, NJ	5	3	60%	88%	
lorfolk, VA	14	3	21%	48%	
Oklahoma City, OK	6	1	17%	61%	
Omaha, NE	5	3	60%	84%	
Philadelphia, PA	9	8	89%	99%	
Phoenix, AZ	2	1	50%	95%	
Portland, OR	6	3	50%	75%	
Providence, RI	4	2	50%	82%	
it. Louis, MO	13	9	69%	96%	
alt Lake City, UT	3	2	67%	85%	
an Antonio, TX	4	1	25%	87%	
an Diego, CA	1	1	100%	100%	
San Francisco, CA	3	3	100%	100%	
Seattle, WA	3	2	67%	97%	
Sioux Falls, SD	2	1	50%	86%	
Washington, D.C.	25	14	56%	92%	
Wilmington, DE	2	1	50%	85%	

- Data for the 2 participating counties in the Providence MSA were not reported in the 1999 DAWN Annual Medical Examiner Data because those jurisdictions provided data for fewer than 10 months in 1999. Both of these jurisdictions provided data for more than 10 months in 2000, and are included in this report.
- Rankin County, MS (Jackson MSA) and Wyandotte County, KS (Kansas City MSA) reported data for fewer than 10 months in 2000 and are not included in this report.

In addition, the following changes were made in an effort to properly classify jurisdictions into their respective metropolitan areas:

- Boulder County, previously tabulated with the Denver metropolitan area, is now listed separately as the Boulder, CO MSA.
- Nassau County and Suffolk County (NY), which constitute a separate metropolitan area, were previously tabulated with the New York City MSA. The Nassau-Suffolk MSA is now shown separately and, for convenience, it is labeled "Long Island."
- Somerset County, NJ is part of the Middlesex-Somerset MSA and is now listed as such. Previously, its data were tabulated along with those for the Newark MSA.

Metropolitan Area Profiles

We provide "Metropolitan Area Profiles" for 36 areas. Figure 1 depicts the general layout of each 2-page profile, with the 8 component tables and graphs labeled A through H. Each is described in this section. A Glossary is provided in **Appendix B** with definitions of terms used in this overview and in the tables.

Table A

Each metropolitan area profile begins with a map displaying the boundaries of the MSA and its component counties. Also provided is information on the area's total population and the proportion of the population residing in DAWN-reporting counties. This information is consistent with that shown in Table 1. Table A then lists each of the component jurisdictions for the MSA, which are numbered to correspond to their location on the area map. For ease of reference, nonparticipating areas are shaded. Jurisdictions marked with an asterisk (*) are highlighted in separate "Area Spotlights."

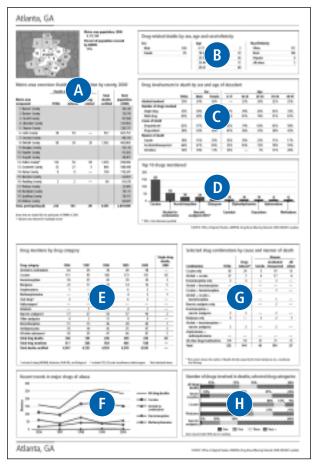


Figure 1. Sample Metropolitan Area Profile layout

An overview of the MSA's data is displayed in the remaining columns in Table A. From left to right, the table lists the total number of drug abuse deaths reported in 2000 for each participating jurisdiction, and the number of those deaths that were drug-induced and drug-related. The next column shows the total number of deaths processed and certified by that jurisdiction in 2000—the figures in this column reflect all deaths certified, not only the drug abuse deaths. Finally, the last column provides population data for each county for 2000. Population data are also shown for nonparticipating jurisdictions, so that readers can assess the extent of DAWN's coverage of the MSA.

The final line of Table A provides a summary of the data for the metropolitan area. The summary includes only the DAWN-participating areas. All subsequent tables are based on aggregated data for the participating jurisdictions in the metro area. The denominator for total drug-related deaths is the figure at the bottom of the "TOTAL" column in Table A.

Table B

Table B presents summary demographic data on all drug-related deaths reported to DAWN by participating jurisdictions in the metropolitan area in 2000. The number of drug-related deaths by sex, age, and race/ethnicity are shown. Readers should note that DAWN does not collect data on decedents under age 6 or over age 97.

Beginning in January 2000, the race and ethnicity categories collected on DAWN report forms changed to match a new standard protocol.⁶ The new protocol permitted separate reporting of race and Hispanic ethnicity; the ability to capture more than one race for an individual; a few modifications in nomenclature (e.g., "Black" was changed to "Black or African American"); division of certain categories ("Asian or Pacific Islander" was split into 2 categories, "Asian" and "Native Hawaiian or Other Pacific Islander"); and elimination of the "Other" category. Despite the increased detail allowed by the new categories, the actual race/ethnicity data reported to DAWN changed very little. As a result, we have retained the classification used previously to tabulate DAWN data. The one exception is that the less commonly used categories are now collapsed into a category termed "All others," representing those not otherwise tabulated.

Table C

Table C provides an overview of the distribution of drug abuse deaths by type and demographic category. Within sex and age, each row totals 100% of the cases designated in the row heading. Drug involvement is described using the following categories:

- Alcohol involved: The proportion of all reported drug abuse deaths in which alcohol was involved. Recall that alcohol is only reportable to DAWN in the presence of another drug, so it is incorrect to conclude that alcohol was the direct or sole cause of death.
- **Number of drugs involved:** Users of the DAWN data have asked for a clearer representation of the number of drugs involved in a case. This row shows the proportion of all drug abuse deaths that involved only one drug ("single-drug") as well as the proportion involving multiple drugs ("multi-drug").
- Cause of death: This row indicates the number of deaths that were drug-induced (i.e., directly caused by drug abuse) and drug-related (i.e., drug abuse was a contributing factor). The total number of drug-induced and drug-related deaths is consistent with the figures shown in the last row of Table A.

⁶ See Office of Management and Budget, *Revisions to the Standards for the Classification of Federal Data on Race and Ethnicity, Federal Register*, 62 FR 58782, October 30, 1997.

Manner of death: This row classifies drug abuse deaths into three categories: suicide, accidental/unexpected, and all others. The "All others" category includes cases in which manner of death was recorded as natural or unknown, or for which data were missing.

Table D

This bar chart shows the ten most common drugs mentioned in cases reported to DAWN, and the number of mentions, across the participating jurisdictions in the metropolitan area. Therefore, the specific drugs appearing in this chart will vary from one MSA to the next.

As noted previously, the level of specificity with which drug data are reported to DAWN varies based on the documentation in the source record. For example, cocaine may be reported to DAWN as the metabolite "benzoylecgonine," the street term "crack," or simply "cocaine." Each of these terms would be accepted into the DAWN database, however, all such mentions would be recoded to "cocaine" for this publication. If a particular DAWN case report contained both "benzoylecgonine" and "cocaine," we would convert the 2 mentions into a single mention of "cocaine," using a process known as de-duplication.

Even more variability is possible for prescription and over-the-counter medications reported to DAWN. For example, the prescription drug meperidine might be reported to DAWN as the brand "Darvon," the metabolite "norpropoxyphene," or the chemical term "propoxyphene hydrochloride." For this report, all such mentions would be recoded as "meperidine" and de-duplicated.

DAWN also receives case reports containing only nonspecific drug terms such as "opiate," "tricyclic antidepressant," "benzodiazepine," or "herbal." Because it is impossible to assign such nonspecific terms to a specific drug, categories such as "narcotic analgesics-NOS," "tricyclic antidepressants-NOS," "benzodiazepines-NOS," and "herbal products-NOS" (where "NOS" means "not otherwise specified") were created and appear in Table D. The reader should understand that terms are classified into an "NOS" category only when assignment to a more specific category is not possible. For example, the 4 NOS categories noted here would never include specific terms such as "morphine," "doxepin," "diazepam," or "echinacea," respectively.

Table E

Table E presents the number of drug mentions reported each year from 1996-2000 for participating jurisdictions within the MSA. Drugs are classified into 14 categories, using a list specifically designed for this report. Single-drug deaths for the last year are also shown.

Drug categories. Table E uses 14 drug categories. Some categories include only a single, specific drug (e.g., cocaine), while others include a number of different substances sharing similar properties. These categories are as follows:

- Alcohol-in-combination. Recall that alcohol is only reportable to DAWN if at least one other reportable substance was also detected. Therefore, the number of single-drug deaths for alcohol-in-combination will always be zero.
- **Cocaine.** Includes both crack and powder cocaine.

- Heroin/morphine. Although heroin may be the ingested drug, it metabolizes to morphine so that, depending on the toxicology testing protocols used, heroin and morphine may not be distinguishable in a given decedent. For this reason, both heroin and morphine are reported in a single category. If a case is reported to have involved both heroin and morphine, those drug mentions are "de-duplicated" and count as only one heroin/morphine mention.
- Marijuana. Includes marijuana and hashish.
- Amphetamines. Includes amphetamines and dextroamphetamines. Does not include other central nervous system stimulants, such as caffeine or methylphenidate.
- Methamphetamine. Includes methamphetamine and substances reported as "speed."
- Club drugs. This category is included because of the recent interest in the group of substances commonly known as "designer" or "club drugs." Because of their small numbers, these substances have been aggregated into a single category for presentation in this table. For the purpose of this report, "club drugs" include methylenedioxymethamphetamine (MDMA or "Ecstasy"); Ketamine; gamma hydroxy butyrate (GHB) and its precursor gamma butyrolactone (GBL); and flunitrazepam (Rohypnol). Readers should note that in other settings, the definition of "club drugs" may include LSD, methamphetamine, or other substances, so caution should be exercised in comparing the data in Table E to data obtained from other sources.
- Hallucinogens. This is a general category that includes LSD, PCP, and miscellaneous hallucinogens.
- **Inhalants.** This broad category includes anesthetic gases and any psychoactive nonpharmaceutical substance for which the documented route of administration was inhalation.
- Narcotic analgesics. This category includes all legal and illegal narcotic analgesics and narcotic analgesic combinations, except for heroin/morphine which was classified separately above. Analysts interested in tracking trends in narcotic-related deaths should sum the "narcotic analgesics" category with the heroin/morphine category.
- Other analgesics. This category includes analgesics other than those classified above. These include antimigraine agents, Cox-2 inhibitors, nonsteroidal anti-inflammatory agents, salicylates, analgesic combinations, and miscellaneous analgesics. Analysts interested in tracking trends in deaths related to the abuse of analgesics should sum this category with the heroin/morphine and narcotic analgesics categories.
- Benzodiazepines. This category includes all benzodiazepines except flunitrazepam, which is classified as a club drug.
- Antidepressants. This category includes all types of antidepressants, including monoamine oxidase inhibitors (MAOIs), selective serotonin reuptake inhibitors (SSRIs), and tricyclic antidepressants.
- All other substances. This row contains all other substances reported to DAWN but not tabulated in the preceding rows. The sum of "all other substances" and the preceding 13 categories yields the "total drug mentions" shown in the next-to-last row of the table.

Readers should note that the total number of deaths in any given drug category (with the exception of alcohol-in-combination, cocaine, and heroin/morphine) is usually quite small, even in metropolitan areas with a relatively large number of drug abuse deaths. The presentation of these data, despite their low frequency, represents a deliberate effort to provide useful information about the relative occurrence of deaths due to the abuse of different types of substances. The publication, *Emergency Department Trends from DAWN*, provides more detailed information about which specific drugs fall into particular categories.

Single-drug deaths. For each drug category listed, the far right-hand column of Table E shows the number of

deaths in 2000 that involved only the listed drug and no others. In nearly all instances, the number of deaths involving only a single drug will be much lower than the total number of deaths in which that drug was reported (shown in the preceding column of 2000 data). Even in single-drug deaths, however, readers should not assume that the drug was necessarily the direct and sole cause of death.

Data gaps. Because DAWN mortality data are actual counts rather than statistical estimates, trends over time can be affected by data gaps (due to facility nonresponse) as well as by the introduction of new jurisdictions. In this report, trend data for 4 metropolitan areas are affected by such factors, and Table E has been modified accordingly for each area. Specifically, the following adaptations to Table E have been made:

- Milwaukee. Until 2000, the Milwaukee MSA was represented in DAWN by only Waukesha County. Milwaukee County began reporting data in 2000. In order to show comparable data over the 5-year period, only Waukesha County's data are shown in Table E of the metropolitan area profile. Data for Milwaukee County are shown in a separate Area Spotlight, described below.
- Philadelphia. In 1996, 1997, 1999, and 2000, 7 counties in the Philadelphia MSA reported data to DAWN. In 1998, only 6 counties provided data. In order to show comparable data for the entire 5-year period, Philadelphia's Table E is based only on the 6 jurisdictions that reported data in each of the 5 years.
- **Providence.** Two counties in the Providence MSA participate in DAWN. In 1999, neither county provided data for more than 10 months of the year. As a result, Table E shows data for only 4 of the 5 years (1996-1998 and 2000).
- **Wilmington, DE.** There is only one DAWN-participating county in the Wilmington MSA. In 1998, that county did not provide data for the full year. As a result, Table E shows data for only 4 of the 5 years (1996-1997 and 1999-2000).

Table F

Table F is a line graph showing recent trends in 4 major drugs of abuse: cocaine, alcohol-in-combination, heroin/morphine, and methamphetamine. The data in this graph exactly match the data in Table E for these 4 categories. Thus, for the 4 MSAs affected by data gaps in Table E (Milwaukee, Philadelphia, Providence, and Wilmington), the line graph in Table F has less than the full complement of data represented, as described above.

Table G

This table shows selected drug combinations by cause and manner of death as reported by all participating jurisdictions in the metropolitan area in 2000. (That is, the "Total" figure in Table G equals the total number of drug abuse deaths shown in Table A.)

Information on drug combinations is provided to demonstrate that drug abuse deaths often involve multiple substances. The 11 categories shown in this table include the most common 1-drug, 2-drug, and 3-drug combinations reported to DAWN by all participating jurisdictions in 2000. That is, all cases submitted in 2000 were reviewed to determine which drugs and drug combinations were most commonly reported, then listed in descending order of total frequency. The top 11 categories form the standard combination list used in Table G.⁷ The same 11 categories

⁷ Overall, deaths involving single mentions of cocaine were more common than deaths involving both alcohol and cocaine, which were in turn more common than deaths involving only heroin/morphine, and so forth.

are reported for every metropolitan area, although the relative frequency of any given combination will vary from MSA to MSA.

Each decedent is assigned to one and only one category in Table G. A case is tallied under the listed drug combination if the decedent had used <u>all</u> and <u>only</u> those substances. For example, a decedent who had used alcohol and cocaine would be included in the totals for the "Alcohol + Cocaine" row, but not in the "Cocaine only" row. A decedent who had used alcohol, cocaine, and heroin would be included in the totals for "Alcohol + Cocaine + Heroin/morphine," but not in the "Alcohol + Cocaine" row. A decedent who had used alcohol, cocaine, heroin, and methamphetamine would be included in the "All other drugs/combinations" row, because that specific 4-drug combination is not shown in the preceding rows.

For each drug or combination, information on the cause and manner of death are provided. The column labeled "Drug-induced" shows the number of all cases involving the listed drug combination that were determined to be drug-induced, or directly caused by the abuse of those drugs. The difference between "Total" and "Drug-induced" deaths for any given combination is the number of "Drug-related" deaths—i.e., deaths in which the abuse of the listed substance(s) was a contributory but not a causal factor. As before, this information is provided so that readers can differentiate "overdose" deaths from deaths in which drug abuse played a less central role.

The remaining columns in Table G show the distribution of deaths in each listed drug combination across the three "manner of death" categories used previously. Specifically, the table shows the number of deaths in each category that were classified as suicide, accidental/unexpected, or other. The "All others" category includes cases in which the manner of death was reported as natural or undetermined, or for which this information was missing. Together, the 3 manner of death categories equal the total number of deaths in each drug combination category.

Readers should note that for Table G and Table H, the use of the term "combination" refers to cases in which multiple drugs were reported. Facilities are not asked to report (and likely could not determine) whether the reported substances were in fact used in combination (i.e., simultaneously). Some street drugs are themselves combinations of multiple substances and are reported as such only when this can be determined from the case file (e.g., the street term "speedball" refers to a combination of heroin and cocaine). Several prescription and over-the-counter substances are also combinations (compounds) of multiple substances (e.g., acetaminophen with codeine), and are classified as such when reported. Classification of multi-drug compounds in the DAWN drug reference vocabulary is shown in detail elsewhere.⁸

Table H

Table H uses a horizontal stacked bar chart to represent graphically the number of drugs involved in all drug abuse deaths, as well as in deaths involving heroin, cocaine, marijuana, and narcotic analgesics. This chart provides somewhat different information than Table G. This information is provided to illustrate the fact that most drug abuse deaths reported to DAWN involve multiple substances. The chart should be interpreted as follows:

All Drug Deaths. The top-most horizontal bar shows the number of substances involved in all drug abuse deaths reported by the participating jurisdictions in the metropolitan area. The bar shows the proportion of

⁸ See Emergency Department Trends from DAWN, Preliminary Estimates January-June 2001.

all drug abuse deaths in the MSA that involved 1 drug, 2 drugs, 3 drugs, and 4 or more drugs. So, for example, the bar may show that 15 percent of all drug abuse deaths in the MSA involved only 1 drug, 30 percent involved 2 drugs, 35 percent involved 3 drugs, and 20 percent involved 4 or more drugs. The denominator for this bar is the total number of drug abuse deaths shown in Table A. The proportion of deaths involving only 1 drug is consistent with the number of "single-drug deaths" reported in Table C; likewise, the combined proportion of deaths involving 2 drugs, 3 drugs, and 4 or more drugs is consistent with the number of "multi-drug deaths" reported in Table C.

- Heroin/morphine. This bar shows the distribution of the number of drugs mentioned in all deaths that involved heroin/morphine. As described above, readers should note that any death for which both heroin and morphine were reported has been reclassified as a single heroin/morphine mention. The bar is coded to show first the proportion of deaths related to heroin/morphine that involved only one drug—that is, they involved heroin/morphine only. The remaining segments of the bar show the number of deaths involving 2 drugs (i.e., heroin/morphine plus one other drug), 3 drugs (i.e., heroin/morphine plus 2 other drugs), and 4 or more drugs (i.e., heroin/morphine plus 3 or more other drugs).
- Cocaine. Interpretation of this bar is the same as described for heroin/morphine.
- Marijuana. Interpretation of this bar is the same as described for heroin/morphine. However, readers should note that there are two common patterns with marijuana that will affect the data displayed in this chart. First, marijuana is rarely the only drug involved in a drug abuse death. Thus, in most cases, the proportion of marijuana-involved cases labeled as "One drug" (i.e., marijuana only) will be zero or nearly zero. Second, many medical examiners and coroners do not run toxicology tests to detect the presence of marijuana. As a result, some facilities report no marijuana mentions to DAWN. This does not mean that marijuana is never involved in a drug abuse death in those jurisdictions—it means only that those data are unavailable. For these areas, there may be no bar for marijuana shown on the graph in Table H.
- Narcotic analgesics. This category is shown in Table H because of increasing interest in certain narcotics other than heroin, and because there is a sufficient number of these cases to warrant further description for most metropolitan areas. As noted above, this category does not include heroin/morphine.

Abbreviated Profiles for Areas with Few Cases

Abbreviated profiles are provided for metropolitan areas with too few cases to produce all 8 tables described above. In order to publish a full 2-page profile for a given metropolitan area, all participating jurisdictions in the MSA must have reported a combined total of at least 30 drug abuse deaths in the reporting year. In 2000, 7 areas reported fewer than 30 drug abuse deaths.

For these 7 MSAs, we provide only Table A. This allows us to show the specific counties included in the metropolitan area, the population of each, the identities of those component jurisdictions that participated in DAWN in 2000, and the number of drug abuse deaths reported by each participating jurisdiction. If the number of participating jurisdictions or reported deaths increases in future years such that total drug abuse deaths exceed 30, then full 2-page metropolitan area profiles will be provided for these areas. Likewise, if any other metropolitan area drops below the 30-case threshold in future years, only Table A will be published for that MSA.

Area "Spotlights"

The next section shines a spotlight on key counties and/or cities within the participating metropolitan areas. This section reviews the criteria used for selecting "spotlight" areas and the tables provided for each.

Selection of "Spotlight" Areas

As a general rule, "spotlight" reports are provided for the county representing the population center of a metropolitan area and/or the county containing the city for which the MSA is named. Spotlight reports are not produced for population centers when fewer than 30 drug abuse deaths are reported (with one exception, noted below). The following examples and exceptions apply:

- We spotlight Fulton County in the Atlanta metropolitan area, because it is both the major population center and contains the city of Atlanta. This is the pattern followed for most participating MSAs.
- In the Boston metropolitan area, we spotlight both Middlesex County (the most populous county in the MSA) and Suffolk County (the county containing the city of Boston). This approach applies similarly to Minneapolis-St. Paul and St. Louis.
- As noted above, data for Milwaukee County are not reflected in Tables E and F of the Milwaukee
 Metropolitan Area Profile. However, these data are provided in a separate spolight on Milwaukee County.

In a few metropolitan areas, we spotlight multiple counties when their large populations and/or local interest warrant separate listings. These include the following:

- Long Island: Separate spotlights are shown for Nassau and Suffolk counties, which are nearly equal in population.
- New York City: Spotlight reports are provided for each of the 5 boroughs. Although Richmond County (Staten Island) reported fewer than 30 drug abuse deaths in 2000, we believed it was important to provide comparable information for each of the 5 counties commonly regarded as constituting New York City.
- Philadelphia: We spotlight both Philadelphia County and Camden County (NJ).
- Washington, DC: We spotlight the District of Columbia and 2 of the most populous counties in suburban Maryland (Montgomery County and Prince George's County).

For some very large metropolitan areas, no spotlight reports could be produced because the metropolitan area contains only one county or had only one participating county. This occurred in the following areas:

- The Los Angeles, Miami, and San Diego metropolitan areas each contain only one county. Because deaths are reported to DAWN at the county level, there are no sub-areas that can be presented separately for these MSAs.
- Nine metropolitan areas contain multiple counties, only one of which participated in DAWN in 2000. Thus, there are no areas for which to produce separate summaries in these MSAs: Birmingham, Cleveland, Kansas City, Las Vegas, Louisville, Oklahoma City, Phoenix, San Antonio, and Wilmington (DE).

Content of Area Spotlight Reports

"Spotlights" provide data in substantially the same format as the full metropolitan area profiles. However, spotlights contain only Tables A through E as described above. Interpretation of these tables is the same as noted above, with the following exceptions:

- Table A provides a map showing the location of the spotlighted area relative to the rest of the MSA, and it provides summary counts of drug abuse deaths, total certified deaths, and county population for 2000.
- Table D shows the 10 most common drugs reported by the spotlighted area in 2000. These may differ from the 10 substances reported in Table D of the Metropolitan Area Profile.
- Table E includes trends only for the spotlighted jurisdiction. If the area did not provide data for all years displayed in the table, cells will be empty for those years.

METROPOLITAN AREA PROFILES

Atlanta, GA



Metro area population, 2000 4,112,198

Percent of population covered by DAWN

70%

Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru	g abuse		
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
1. Barrow County					46,144
2. Bartow County					76,019
3. Carroll County					87,268
4. Cherokee County					141,903
5. Clayton County					236,517
6. Cobb County	18	18	_	512	607,751
7. Coweta County					89,215
8. DeKalb County	58	34	24	1,562	665,865
9. Douglas County					92,174
10. Fayette County					91,263
11. Forsyth County					98,407
12. Fulton County*	114	54	60	1,345	816,006
13. Gwinnett County	32	27	5	866	588,448
14. Henry County	9	9	_	190	119,341
15. Newton County					62,001
16. Paulding County	2	2	_	60	81,678
17. Pickens County					22,983
18. Rockdale County					70,111
19. Spalding County					58,417
20. Walton County					60,687
Total, participating (6)	233	144	89	4,535	2,879,089

Areas that are shaded did not participate in DAWN in 2000.

Drug-related deaths by sex, age and race/ethnicity Sex Age Race/Ethnicity 168 6-17 3 White Male 121 65 23 Black 104 Female 18-24 25-34 46 6

35-44

45-97

Hispanic

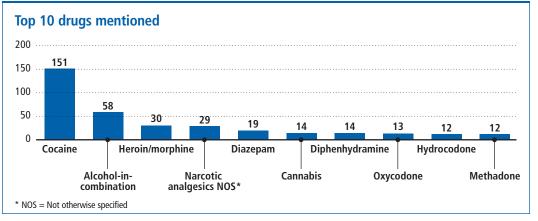
All others

72

89

2

		S	ex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	25%	24%	26%	_	22%	33%	22%	25%
Number of drugs involved	I							
Single-drug	35%	40%	23%	33%	39%	26%	43%	33%
Multi-drug	65%	60%	77%	67%	61%	74%	57%	67%
Cause of death								
Drug-induced	62%	57%	74%	33%	74%	63%	63%	58%
Drug-related	38%	43%	26%	67%	26%	37%	38%	42%
Manner of death								
Suicide	18%	15%	25%	33%	35%	22%	11%	17%
Accidental/unexpected	66%	67%	65%	33%	65%	72%	78%	55%
All others	16%	18%	11%	33%	—	7%	11%	28%



^{*} Indicates area featured in Spotlight section

Drug mentions by drug category

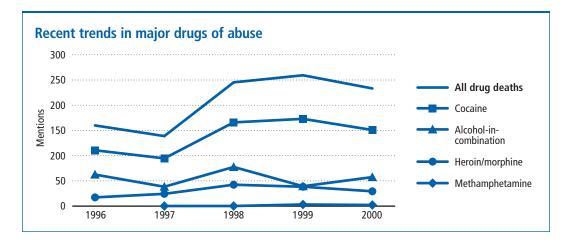
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	63	39	78	40	58	_
Cocaine	111	95	166	173	151	65
Heroin/morphine	18	25	43	39	30	3
Marijuana	22	17	24	14	14	5
Amphetamines	1			6	2	——————————————————————————————————————
Methamphetamine		1	1	4	3	1
Club drugs ¹	3	1		6	2	——————————————————————————————————————
Hallucinogens ²			1			——————————————————————————————————————
Inhalants		1		4	1	——————————————————————————————————————
Narcotic analgesics ³	17	27	54	57	90	2
Other analgesics	4	2	11	4	9	——————————————————————————————————————
Benzodiazepines	11	13	36	28	44	1
Antidepressants	25	18	42	25	47	2
All other substances ³	42	29	47	66	87	3
Total drug deaths	160	139	245	259	233	82
Total drug mentions	317	268	503	466	538	_
Total deaths certified	4,347	4,223	4,553	4,378	4,535	_

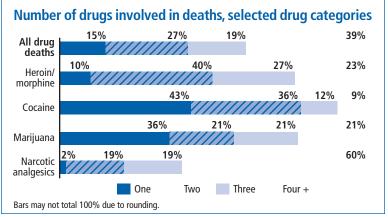
¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

Selected drug combinations by cause and manner of death

		1 1		Manner			
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others		
Cocaine only	65	29	5	47	13		
Alcohol + cocaine	27	7	4	17	6		
Heroin/morphine only	3	3	_	3			
Alcohol + heroin/morphine	—	—	—	_			
Cocaine + heroin/morphine	7	6	—	7			
Alcohol + cocaine + heroin/morphine	1	1	_	1	_		
Narcotic analgesics only	2	1	_	2	<u> </u>		
Heroin/morphine + narcotic analgesics	2	2		2	_		
Marijuana only	5	—	2	2	1		
Alcohol + heroin/morphine + narcotic analgesics	2	2	_	2	_		
Amphetamine + methamphetamine	_	_	_	_	_		
All other drugs/combinations	119	93	31	71	17		
Total	233	144	42	154	37		

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Baltimore, MD



Metro area population, 2000 2,552,994

Percent of population covered by DAWN 100%

Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru	g abuse		
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
1. Anne Arundel County	38	34	4	355	489,656
2. Baltimore City*	360	306	54	3,507	651,154
3. Baltimore County	98	80	18	642	754,292
4. Carroll County	6	5	1	85	150,897
5. Harford County	15	11	4	170	218,590
6. Howard County	12	8	4	114	247,842
7. Queen Anne's County	3	1	2	24	40,563
Total, participating (7)	532	445	87	4,897	2,552,994

^{*} Indicates area featured in Spotlight section

Drug-related deaths by sex, age and race/ethnicity

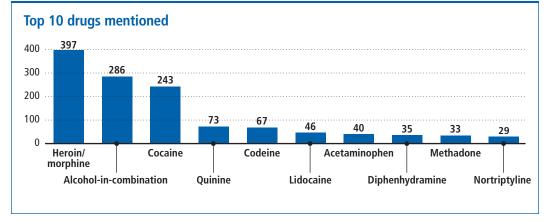
Sex	
Male	417
Female	115

Age	
6-17	5
18-24	32
25-34	98
35-44	240
45-97	157

Race/Ethnicity	
White	280
Black	250
Hispanic	_
All others	-

Drug involvement in death by sex and age of decedent

		Sex Age					Age						Age						Age				
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97															
Alcohol involved	54%	56%	45%	_	41%	54%	57%	53%															
Number of drugs involved	I																						
Single-drug	9%	9%	10%	_	16%	9%	8%	10%															
Multi-drug	91%	91%	90%	100%	84%	91%	92%	90%															
Cause of death																							
Drug-induced	84%	83%	84%	100%	81%	83%	86%	81%															
Drug-related	16%	17%	16%	_	19%	17%	14%	19%															
Manner of death																							
Suicide	6%	4%	13%	20%	9%	3%	3%	11%															
Accidental/unexpected	3%	3%	3%	<u> </u>	6%	7%	2%	1%															
All others	91%	93%	84%	80%	84%	90%	95%	88%															



Drug mentions by drug category

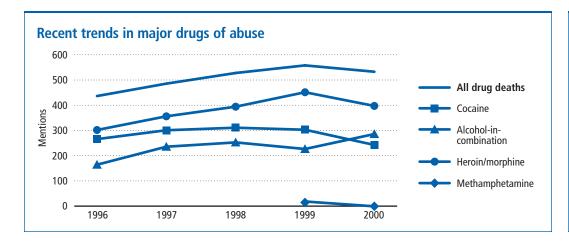
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	165	236	253	227	286	_
Cocaine	266	301	311	303	243	13
Heroin/morphine	302	356	394	451	397	29
Marijuana					—	_
Amphetamines	1				1	_
Methamphetamine				16	1	_
Club drugs ¹	3		3	3	3	_
Hallucinogens ²	5	1	3	2	7	_
Inhalants	3	1	1	2	1	_
Narcotic analgesics ³	132	154	179	122	147	3
Other analgesics	40	43	44	57	51	1
Benzodiazepines	49	34	35	11	26	1
Antidepressants	100	104	139	116	118	_
All other substances ³	417	448	534	424	316	1
Total drug deaths	436	485	527	557	532	48
Total drug mentions	1,483	1,678	1,896	1,734	1,597	_
Total deaths certified	4,713	4,622	4,738	4,953	4,897	<u> </u>

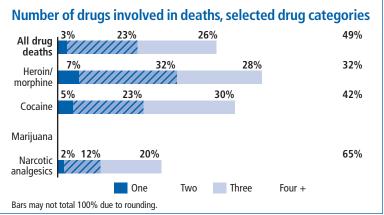
¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

Selected drug combinations by cause and manner of death

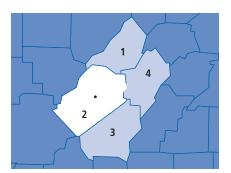
		1 1	Manner							
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others					
Cocaine only	13	4	2	_	11					
Alcohol + cocaine	26	6	7	5	14					
Heroin/morphine only	29	27	_	_	29					
Alcohol + heroin/morphine	73	70	_	_	73					
Cocaine + heroin/morphine	21	18	_	_	21					
Alcohol + cocaine + heroin/morphine	42	40	_	_	42					
Narcotic analgesics only	3	2	_	_	3					
Heroin/morphine + narcotic analgesics	5	5		_	5					
Marijuana only	_	_	_	_	_					
Alcohol + heroin/morphine + narcotic analgesics	4	4		_	4					
Amphetamine + methamphetamine	_	_	_	_	_					
All other drugs/combinations	316	269	23	10	283					
Total	532	445	32	15	485					

* This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Birmingham, AL



Metro area population, 2000 921,106 Percent of population covered by DAWN 72%

Metro area overview: Deaths and population by county, 2000

		Deaths	involving dru	g abuse		
-	Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
I	1. Blount County					51,024
	2. Jefferson County	111	59	52	576	662,047
	3. Shelby County					143,293
	4. St. Clair County					64,742
1	otal, participating (1)	111	59	52	576	662,047

Areas that are shaded did not participate in DAWN in 2000.

Drug-related deaths by sex, age and race/ethnicity

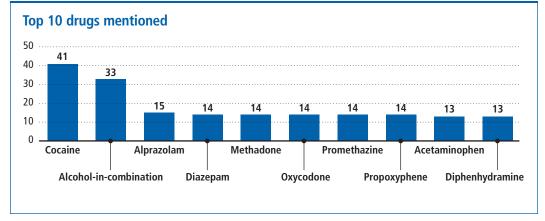
Sex									
Male									75
Female	 	 	 	 	 	 		 	35

Age	
6-17	3
18-24	9
25-34	21
35-44	33
45-97	45

Race/Ethnicity	
White	75
Black	33
Hispanic	1
All others	2

Drug involvement in death by sex and age of decedent

		S	ex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	30%	32%	26%	_	22%	14%	33%	38%
Number of drugs involved	I							
Single-drug	16%	21%	3%	67%	22%	10%	12%	18%
Multi-drug	84%	79%	97%	33%	78%	90%	88%	82%
Cause of death								
Drug-induced	53%	44%	71%	33%	33%	62%	64%	47%
Drug-related	47%	56%	29%	67%	67%	38%	36%	53%
Manner of death								
Suicide	32%	31%	34%	_	44%	33%	24%	36%
Accidental/unexpected	52%	52%	51%	33%	56%	52%	58%	49%
All others	16%	17%	14%	67%	—	14%	18%	16%



Drug mentions by drug category

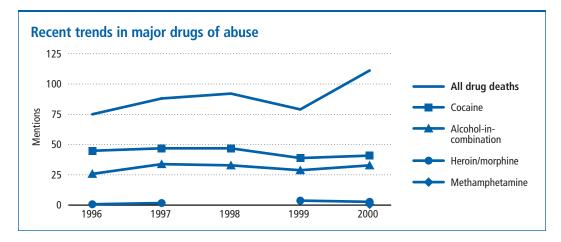
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	26	34	33	29	33	_
Cocaine	45	47	47	39	41	12
Heroin/morphine	1	2	_	4	3	_
Marijuana		3	2		2	_
Amphetamines			1		1	_
Methamphetamine			_		1	_
Club drugs ¹			1		3	1
Hallucinogens ²			_			_
Inhalants	_	_	_	1	_	_
Narcotic analgesics ³	31	19	31	40	69	2
Other analgesics	13	11	9	14	16	_
Benzodiazepines	18	42	32	26	47	2
Antidepressants	29	22	36	40	60	1
All other substances ³	31	39	37	33	63	_
Total drug deaths	75	88	92	79	111	18
Total drug mentions	194	219	229	226	339	-
Total deaths certified	687	682	684	654	576	_

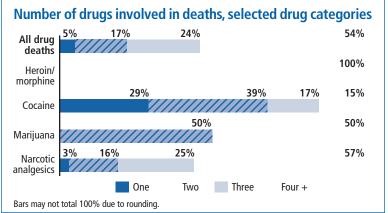
¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

Selected drug combinations by cause and manner of death

			Manner			
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All other	
Cocaine only	12	3	2	5	5	
Alcohol + cocaine	11	4	1	7	3	
Heroin/morphine only	_	_	—	_	_	
Alcohol + heroin/morphine	_	_	—	_	_	
Cocaine + heroin/morphine	—	_	—	_	_	
Alcohol + cocaine + heroin/morphine	_	_	_	_	_	
Narcotic analgesics only	2	1	2		—	
Heroin/morphine + narcotic analgesics	_	_	_	<u> </u>	_	
Marijuana only	—	—		_		
Alcohol + heroin/morphine + narcotic analgesics	_	_	_	_	_	
Amphetamine + methamphetamine	_	_	_	_	_	
All other drugs/combinations	86	51	30	46	10	
Total	111	59	35	58	18	

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Boston, MA



Metro area population, 2000 5,287,393

Percent of population covered by DAWN 76%

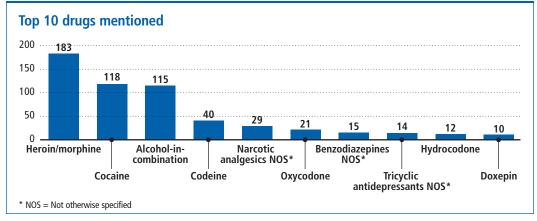
Metro area overview: Deaths and population by county, 2000

		Deaths	involving dru			
-	Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
	1. Bristol County					534,678
	2. Essex County	78	73	5	351	723,419
	3. Middlesex County*	104	94	10	580	1,465,396
	4. Norfolk County	43	40	3	260	650,308
	5. Plymouth County	24	23	1	144	472,822
	6. Suffolk County*	94	86	8	753	689,807
	7. Worcester County					750,963
T	otal, participating (5)	343	316	27	2,088	4,001,752

Areas that are shaded did not participate in DAWN in 2000.

Sex		Age		Race/Ethnicity	
Male	242	6-17	2	White	300
Female	100	18-24	32	Black	13
		25-34	78	Hispanic	18
		35-44	131	All others	12
		45-97	100	***************************************	

		Sex				Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	34%	36%	26%	_	28%	36%	37%	30%
Number of drugs involve	d							
Single-drug	34%	35%	31%	_	31%	27%	29%	47%
Multi-drug	66%	65%	69%	100%	69%	73%	71%	53%
Cause of death								
Drug-induced	92%	92%	93%	100%	84%	92%	93%	93%
Drug-related	8%	8%	7%	—	16%	8%	7%	7%
Manner of death								
Suicide	16%	8%	37%	50%	16%	9%	15%	24%
Accidental/unexpected	1%	2%	1%	<u> </u>	3%	_	2%	2%
All others	82%	90%	62%	50%	81%	91%	84%	74%



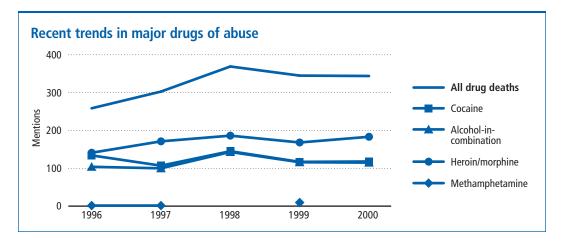
^{*} Indicates area featured in Spotlight section

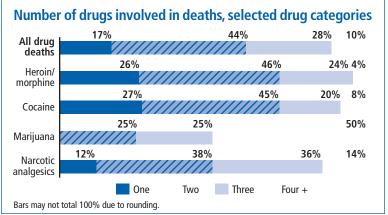
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	104	100	143	116	115	_
Cocaine	134	107	145	117	118	32
Heroin/morphine	141	171	186	168	183	47
Marijuana		1	1	_	4	_
Amphetamines	—	2	1	_	_	_
Methamphetamine	2	2	_	10	—	_
Club drugs ¹			_		1	1
Hallucinogens ²			_		1	1
Inhalants	5	5	6	5	_	_
Narcotic analgesics ³	142	97	108	74	118	14
Other analgesics	32	37	24	13	12	4
Benzodiazepines	24	26	51	15	25	1
Antidepressants	47	66	110	66	54	9
All other substances ³	66	70	72	26	36	7
Total drug deaths	258	302	368	344	343	116
Total drug mentions	697	684	847	610	667	_
Total deaths certified	2,244	2,271	2,296	2,224	2,088	—

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

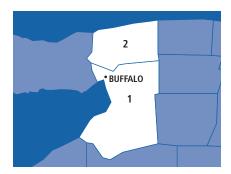
				Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All other
Cocaine only	32	30	2	_	30
Alcohol + cocaine	17	11	2	3	12
Heroin/morphine only	47	43	_	_	47
Alcohol + heroin/morphine	31	30	_	_	31
Cocaine + heroin/morphine	24	23	1	_	23
Alcohol + cocaine + heroin/morphine	13	13	_	_	13
Narcotic analgesics only	14	13	2	_	12
Heroin/morphine + narcotic analgesics	20	20	2	_	18
Marijuana only	_	_	_	_	_
Alcohol + heroin/morphine + narcotic analgesics	17	17	1	_	16
Amphetamine + methamphetamine	<u>—</u>	_	<u>—</u>	<u>—</u>	_
All other drugs/combinations	128	116	46	2	80
Total	343	316	56	5	282

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Buffalo, NY



Metro area population, 2000 1,170,111 Percent of population covered by DAWN 100%

Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru			
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
1. Erie County*	83	37	46	943	950,265
2. Niagara County	6	4	2	836	219,846
Total, participating (2)	89	41	48	1,779	1,170,111

^{*} Indicates area featured in Spotlight section

Drug-related deaths by sex, age and race/ethnicity

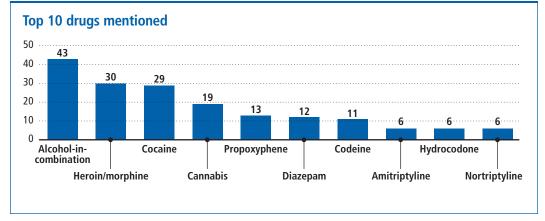
Sex		
Male		71
Female	 	17

Age	
6-17	1
18-24	8
25-34	15
35-44	30
45-97	35

White	6
Black	2
Hispanic	
All others	

Drug involvement in death by sex and age of decedent

		S	ex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	48%	48%	53%	100%	75%	20%	53%	49%
Number of drugs involved	l							
Single-drug	19%	18%	24%	_	_	47%	7%	23%
Multi-drug	81%	82%	76%	100%	100%	53%	93%	77%
Cause of death								
Drug-induced	46%	42%	65%	_	63%	53%	57%	31%
Drug-related	54%	58%	35%	100%	38%	47%	43%	69%
Manner of death								
Suicide	13%	14%	12%	_	25%	7%	13%	14%
Accidental/unexpected	9%	10%	—	100%	—	20%	7%	6%
All others	78%	76%	88%	—	75%	73%	80%	80%

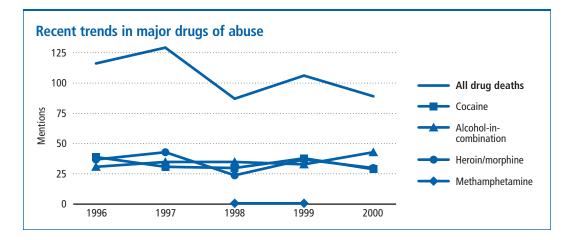


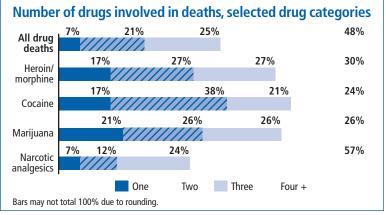
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	31	35	35	33	43	_
Cocaine	39	31	30	38	29	5
Heroin/morphine	37	43	24	37	30	5
Marijuana	8	13	17	12	19	4
Amphetamines			_	1	—	_
Methamphetamine			1	1	—	_
Club drugs ¹			1	1	2	_
Hallucinogens ²			_		—	_
Inhalants	_	1	3	_	_	_
Narcotic analgesics ³	45	52	34	29	42	3
Other analgesics	15	15	4	9	2	_
Benzodiazepines	28	27	14	19	23	_
Antidepressants	23	57	30	40	30	_
All other substances ³	60	89	44	43	32	_
Total drug deaths	116	129	87	106	89	17
Total drug mentions	286	363	237	263	252	_
Total deaths certified	1,906	1,880	1,877	1,900	1,779	_

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

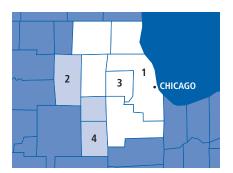
				Manner			
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others		
Cocaine only	5	3	1	_	4		
Alcohol + cocaine	5	1	1	1	3		
Heroin/morphine only	5	4	_	_	5		
Alcohol + heroin/morphine	1	_	_	_	1		
Cocaine + heroin/morphine	3	2	—	_	3		
Alcohol + cocaine + heroin/morphine	2	2	_	_	2		
Narcotic analgesics only	3	—	1	_	2		
Heroin/morphine + narcotic analgesics	2	1		_	2		
Marijuana only	4	—			4		
Alcohol + heroin/morphine + narcotic analgesics	1	_	_	_	1		
Amphetamine + methamphetamine	_	_	_	_	_		
All other drugs/combinations	58	28	9	7	42		
Total	89	41	12	8	69		

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Chicago, IL



Metro area population, 2000 8,272,768

Percent of population covered by DAWN 92%

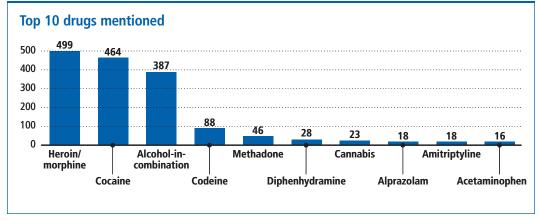
Metro area overview: Deaths and population by county, 2000

	Death	ns involving	drug abuse		
Metro area component	TOTAL	Drug- induce			Total population (2000)
1. Cook County*	703	494	209	5,301	5,376,741
2. DeKalb County					88,969
3. DuPage County	61	52	9	3,615	904,161
4. Grundy County					37,535
5. Kane County	39	25	14	352	404,119
6. Kendall County					54,544
7. Lake County	46	35	11	2,946	644,356
8. McHenry County	20	11	9	225	260,077
9. Will County					502,266
Total, participating (5) 869	617	252	12,439	7,589,454

Areas that are shaded did not participate in DAWN in 2000.

Sex		Age		Race/Ethnicity	
Male	658	6-17	8	White	396
Female	205	18-24	76	Black	381
		25-34	176	Hispanic	85
		35-44	355	All others	7
		45-97	254	***************************************	

		S	ex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	45%	48%	32%	_	36%	49%	46%	43%
Number of drugs involved	l							
Single-drug	31%	30%	34%	38%	29%	31%	29%	33%
Multi-drug	69%	70%	66%	63%	71%	69%	71%	67%
Cause of death								
Drug-induced	71%	72%	68%	75%	78%	74%	71%	67%
Drug-related	29%	28%	32%	25%	22%	26%	29%	33%
Manner of death								
Suicide	11%	9%	16%	13%	14%	9%	9%	13%
Accidental/unexpected	86%	88%	80%	63%	84%	90%	89%	82%
All others	3%	3%	4%	25%	1%	1%	2%	5%



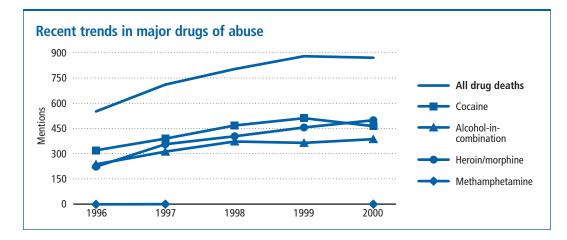
^{*} Indicates area featured in Spotlight section

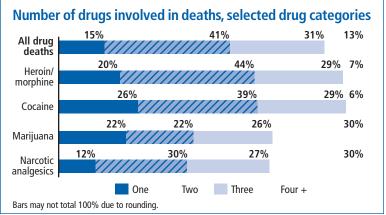
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	238	313	373	365	387	_
Cocaine	321	390	468	511	464	120
Heroin/morphine	224	357	404	456	499	101
Marijuana	11	16	26	17	23	5
Amphetamines		1	1	1	4	_
Methamphetamine	1	2	_	—	2	_
Club drugs ¹	1	_	_	3	9	2
Hallucinogens ²	3	6	3	4	6	_
Inhalants	1	4	1	1	_	_
Narcotic analgesics ³	122	136	155	175	171	21
Other analgesics	37	26	28	32	27	2
Benzodiazepines	25	38	36	37	43	1
Antidepressants	64	68	47	48	60	8
All other substances ³	66	61	42	90	86	8
Total drug deaths	551	710	802	878	869	268
Total drug mentions	1,114	1,418	1,584	1,740	1,781	_
Total deaths certified	12,247	11,694	12,093	12,731	12,439	_

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

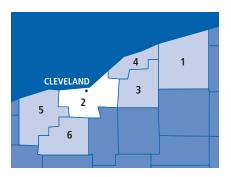
				Manner			
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others		
Cocaine only	120	52	10	109	1		
Alcohol + cocaine	87	36	16	66	5		
Heroin/morphine only	101	68	2	96	3		
Alcohol + heroin/morphine	113	98	1	111	1		
Cocaine + heroin/morphine	73	60	_	71	2		
Alcohol + cocaine + heroin/morphine	99	86	_	97	2		
Narcotic analgesics only	21	12	3	16	2		
Heroin/morphine + narcotic analgesics	25	21	_	24	1		
Marijuana only	5	_	2	2	1		
Alcohol + heroin/morphine + narcotic analgesics	16	15	2	14	_		
Amphetamine + methamphetamine	_	_	_	_	_		
All other drugs/combinations	209	169	58	144	7		
Total	869	617	94	750	25		

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Cleveland, OH



Metro area population, 2000 2,250,871 Percent of population covered

Percent of population covered by DAWN 62%

Metro area overview: Deaths and population by county, 2000

		Deaths	involving dru			
•	Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
ı	1. Ashtabula County					102,728
	2. Cuyahoga County	143	142	1	3,637	1,393,978
	3. Geauga County					90,895
	4. Lake County					227,511
	5. Loraine County					284,664
	6. Medina County					151,095
1	Total, participating (1)	143	142	1	3,637	1,393,978

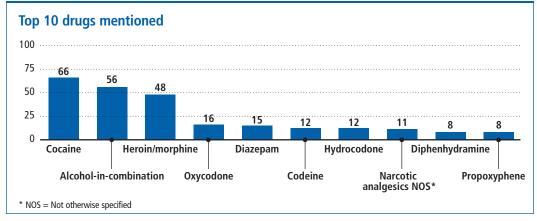
Areas that are shaded did not participate in DAWN in 2000.

Drug-related	deaths by sex	, age and race/et	thnicity		
Sex		Age		Race/Ethnicity	
Male	110	6-17	2	White	79
Female	33	18-24	3	Black	63
		25-34	18	Hispanic	1
		35-44	ДЯ	All others	

45-97

72

		S	ex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	39%	37%	45%	50%	33%	33%	52%	32%
Number of drugs involved	l							
Single-drug	34%	36%	27%	_	33%	28%	21%	46%
Multi-drug	66%	64%	73%	100%	67%	72%	79%	54%
Cause of death								
Drug-induced	99%	99%	100%	100%	100%	100%	100%	99%
Drug-related	1%	1%	—	—	—	·····	·····	1%
Manner of death								
Suicide	6%	5%	9%	_	33%	6%	10%	3%
Accidental/unexpected	92%	94%	88%	100%	67%	94%	90%	94%
All others	1%	1%	3%	·····	—	·····	·····	3%

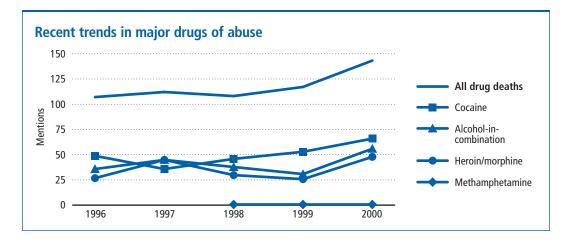


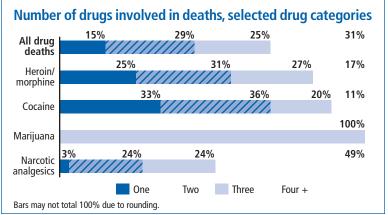
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	36	45	38	31	56	_
Cocaine	49	36	46	53	66	22
Heroin/morphine	27	45	30	26	48	12
Marijuana	3	6	2	1	2	_
Amphetamines	_	_	_	_		_
Methamphetamine	_	_	1	1	1	1
Club drugs ¹		_	_	2	_	_
Hallucinogen ²	1	_	_	2		_
Inhalants	1	_	_	_	1	_
Narcotic analgesics ³	51	44	37	34	63	2
Other analgesics	11	6	8	7	4	1
Benzodiazepines	19	19	20	17	22	1
Antidepressants	16	25	23	19	22	2
All other substances ³	25	30	26	25	32	8
Total drug deaths	107	112	108	117	143	49
Total drug mentions	239	256	231	218	317	_
Total deaths certified	2,838	2,536	2,682	3,426	3,637	_

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

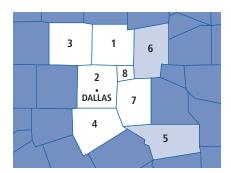
			Manner			
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others	
Cocaine only	22	22	_	22	_	
Alcohol + cocaine	14	14		14	_	
Heroin/morphine only	12	12	_	12	_	
Alcohol + heroin/morphine	6	6	_	6	_	
Cocaine + heroin/morphine	6	6	1	5	_	
Alcohol + cocaine + heroin/morphine	5	5	_	5	_	
Narcotic analgesics only	2	2		2	_	
Heroin/morphine + narcotic analgesics	2	2	_	2	_	
Marijuana only	_	_	_	_	_	
Alcohol + heroin/morphine + narcotic analgesics	2	2		2		
Amphetamine + methamphetamine	_	_	_	_	_	
All other drugs/combinations	72	71	8	62	2	
Total	143	142	9	132	2	

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Dallas, TX



Metro area population, 2000 3,519,176

Percent of population covered by DAWN 96%

Metro area overview: Deaths and population by county, 2000

Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
1. Collin County	31	28	3	322	491,675
2. Dallas County*	271	138	133	3,283	2,218,899
3. Denton County	10	10	_	253	432,976
4. Ellis County	_	_	_	55	111,360
5. Henderson County					73,277
6. Hunt County					76,596
7. Kaufman County	8	4	4	118	71,313
8. Rockwall County	2	_	2	213	43,080
Total, participating (6)	322	180	142	4,244	3,369,303

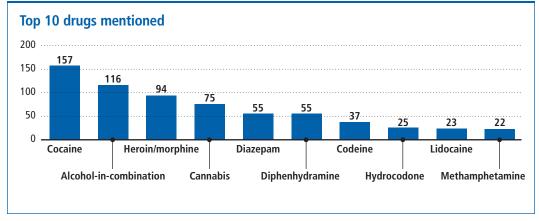
Areas that are shaded did not participate in DAWN in 2000.

Drug-related deaths by sex, age and race/ethnicity Sex Age Race/Ethnicity Male 228 6-17 5 White 196 92 41 Black 90 Female 18-24 25-34 65 31 Hispanic 5 35-44 All others 107

104

45-97

		S	ex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	36%	39%	29%	40%	27%	45%	36%	34%
Number of drugs involved	ł							
Single-drug	19%	20%	15%	40%	12%	22%	18%	19%
Multi-drug	81%	80%	85%	60%	88%	78%	82%	81%
Cause of death								
Drug-induced	56%	50%	68%	60%	66%	52%	59%	51%
Drug-related	44%	50%	32%	40%	34%	48%	41%	49%
Manner of death								
Suicide	16%	17%	15%	20%	17%	25%	12%	15%
Accidental/unexpected	60%	63%	53%	60%	76%	60%	66%	47%
All others	24%	21%	32%	20%	7%	15%	21%	38%



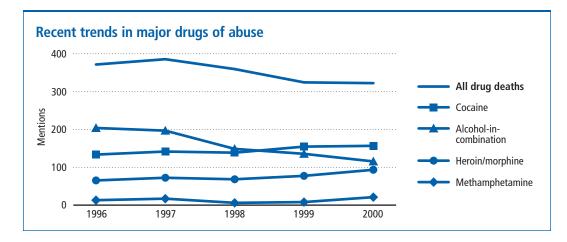
^{*} Indicates area featured in Spotlight section

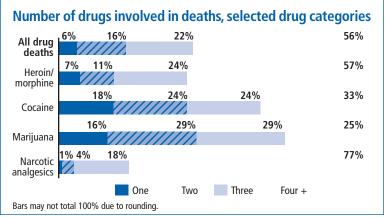
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	204	197	149	136	116	_
Cocaine	134	142	139	155	157	29
Heroin/morphine	66	73	69	78	94	7
Marijuana	125	112	92	99	75	12
Amphetamines	10	14	7	5	8	_
Methamphetamine	14	18	7	9	22	2
Club drugs ¹	2	4	2	3	10	3
Hallucinogens ²	2			4	7	_
Inhalants	1		_		4	_
Narcotic analgesics ³	39	71	61	61	101	1
Other analgesics	32	42	36	43	30	1
Benzodiazepines	76	63	56	52	73	_
Antidepressants	71	84	84	78	87	1
All other substances ³	172	226	178	139	189	4
Total drug deaths	371	385	359	324	322	60
Total drug mentions	948	1,046	880	862	973	_
Total deaths certified	4,566	3,977	4,185	4,168	4,244	_

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

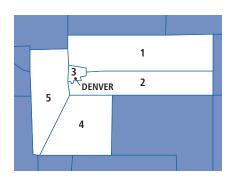
				Manner			
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others		
Cocaine only	29	14	1	18	10		
Alcohol + cocaine	21	7	3	15	3		
Heroin/morphine only	7	7	_	6	1		
Alcohol + heroin/morphine	4	2	_	3	1		
Cocaine + heroin/morphine	3	1	_	2	1		
Alcohol + cocaine + heroin/morphine	5	3	_	4	1		
Narcotic analgesics only	1	_	_	_	1		
Heroin/morphine + narcotic analgesics	_	_	_	_	_		
Marijuana only	12	—	1	3	8		
Alcohol + heroin/morphine + narcotic analgesics	1	1	_	1	_		
Amphetamine + methamphetamine	_	_	_	_	_		
All other drugs/combinations	239	145	48	141	50		
Total	322	180	53	193	76		

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Denver, CO



Metro area population, 2000 2,109,282

Percent of population covered by DAWN 100%

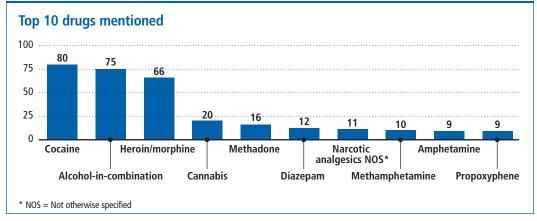
Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru			
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
1. Adams County	22	22	_	1,611	363,857
2. Arapahoe County	59	27	32	2,230	487,967
3. Denver County*	123	95	28	2,943	554,636
4. Douglas County	6	4	2	250	175,766
5. Jefferson County	32	28	4	2,633	527,056
Total, participating (5)	242	176	66	9,667	2,109,282

^{*} Indicates area featured in Spotlight section

Drug-related deaths by sex, age and race/ethnicity Sex Age Race/Ethnicity Male 166 6-17 5 White 176 68 15 Black 21 Female 18-24 25-34 44 40 Hispanic 35-44 89 5 All others 45-97 89

		S	ex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	31%	36%	19%	20%	40%	36%	27%	31%
Number of drugs involved	t							
Single-drug	43%	44%	40%	40%	40%	39%	44%	44%
Multi-drug	57%	56%	60%	60%	60%	61%	56%	56%
Cause of death								
Drug-induced	73%	71%	79%	60%	67%	80%	80%	64%
Drug-related	27%	29%	21%	40%	33%	20%	20%	36%
Manner of death								
Suicide	17%	13%	26%	20%	20%	18%	12%	21%
Accidental/unexpected	66%	70%	59%	60%	80%	73%	70%	57%
All others	17%	17%	15%	20%		9%	18%	21%

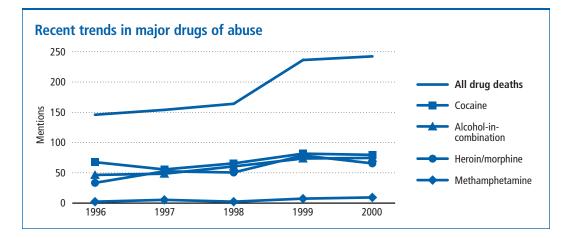


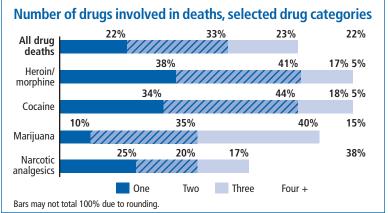
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	47	49	61	74	75	_
Cocaine	68	56	66	82	80	27
Heroin/morphine	34	53	51	79	66	25
Marijuana	1	4	3	20	20	2
Amphetamines	2	5	3	5	9	1
Methamphetamine	3	6	3	8	10	3
Club drugs ¹	—	_	_	_	2	1
Hallucinogens ²	—	_	_	_	1	1
Inhalants	—	1	2	_	1	_
Narcotic analgesics ³	31	38	40	71	64	16
Other analgesics	8	4	6	4	16	5
Benzodiazepines	9	11	11	39	28	1
Antidepressants	20	18	25	33	37	8
All other substances ³	29	20	27	37	68	13
Total drug deaths	146	154	164	236	242	103
Total drug mentions	252	265	298	452	477	_
Total deaths certified	7,990	8,425	8,623	8,864	9,667	_

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

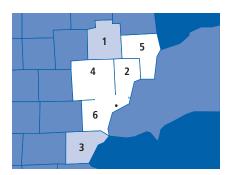
				Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others
Cocaine only	27	19	3	19	5
Alcohol + cocaine	22	15	2	19	1
Heroin/morphine only	25	21	1	21	3
Alcohol + heroin/morphine	11	11	_	9	2
Cocaine + heroin/morphine	7	7	_	6	1
Alcohol + cocaine + heroin/morphine	6	5	1	5	_
Narcotic analgesics only	16	10	2	8	6
Heroin/morphine + narcotic analgesics	4	2	_	3	1
Marijuana only	2	_	_	_	2
Alcohol + heroin/morphine + narcotic analgesics	1	1	_	1	_
Amphetamine + methamphetamine	1	_	1	<u>—</u>	_
All other drugs/combinations	120	85	32	69	19
Total	242	176	42	160	40

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Detroit, MI



Metro area population, 2000 4,441,551

Percent of population covered by DAWN 95%

Metro area overview: Deaths and population by county, 2000

		Deaths	involving dru	g abuse		
-	Metro area omponent	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
	1. Lapeer County					87,904
	2. Macomb County	91	71	20	1,485	788,149
	3. Monroe County					145,945
	4. Oakland County	203	128	75	4,234	1,194,156
	5. St. Clair County	8	6	2	850	164,235
	6. Wayne County*	402	211	191	3,327	2,061,162
T	otal, participating (4)	704	416	288	9,896	4,207,702

Areas that are shaded did not participate in DAWN in 2000.

Drug-related deaths by sex, age and race/ethnicity

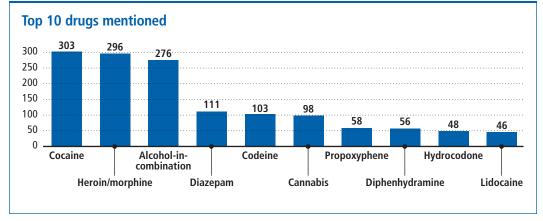
Sex		
Male		500
Female	 	 200

Age	
6-17	10
18-24	 35
25-34	 97
35-44	 257
45-97	305

Race/Ethnicity	
White	438
Black	25
Hispanic	(
All others	4

Drug involvement in death by sex and age of decedent

		S	ex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	39%	42%	32%	30%	57%	48%	39%	35%
Number of drugs involved	l							
Single-drug	19%	19%	17%	20%	14%	15%	16%	23%
Multi-drug	81%	81%	83%	80%	86%	85%	84%	77%
Cause of death								
Drug-induced	59%	59%	61%	30%	37%	60%	72%	51%
Drug-related	41%	41%	40%	70%	63%	40%	28%	49%
Manner of death								
Suicide	10%	9%	14%	20%	17%	15%	8%	10%
Accidental/unexpected	39%	40%	36%	40%	34%	47%	45%	31%
All others	51%	51%	51%	40%	49%	37%	47%	59%



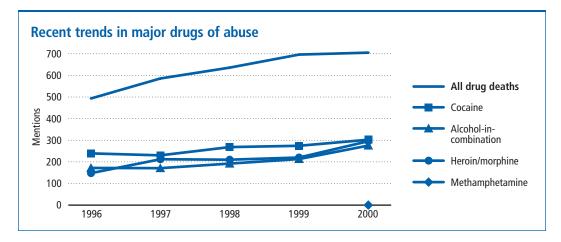
^{*} Indicates area featured in Spotlight section

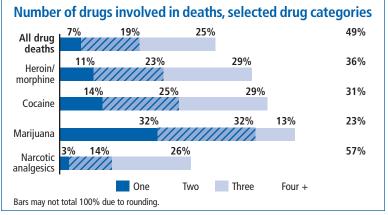
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	173	172	193	214	276	_
Cocaine	240	231	269	275	303	43
Heroin/morphine	149	213	211	221	296	33
Marijuana	61	90	50	93	98	31
Amphetamines	1	_	2	3	8	_
Methamphetamine		_	_		2	_
Club drugs ¹	1		1	2	5	_
Hallucinogens ²	_	_	2	1	_	_
Inhalants	4	3	1	1	_	_
Narcotic analgesics ³	176	206	245	284	298	9
Other analgesics	26	37	41	38	42	_
Benzodiazepines	100	135	147	177	189	1
Antidepressants	96	104	137	131	138	2
All other substances ³	194	337	338	402	348	12
Total drug deaths	493	585	635	695	704	131
Total drug mentions	1,221	1,528	1,637	1,842	2,003	-
Total deaths certified	9,761	9,476	9,330	10,033	9,896	——————————————————————————————————————

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

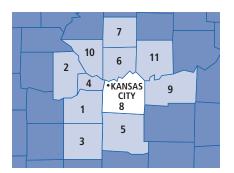
				Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others
Cocaine only	43	17	_	16	27
Alcohol + cocaine	34	13	5	18	11
Heroin/morphine only	33	10	2	14	17
Alcohol + heroin/morphine	21	17	_	9	12
Cocaine + heroin/morphine	17	13	—	7	10
Alcohol + cocaine + heroin/morphine	30	27	_	14	16
Narcotic analgesics only	9	5	3	1	5
Heroin/morphine + narcotic analgesics	19	12	1	9	9
Marijuana only	31	1	6	5	20
Alcohol + heroin/morphine + narcotic analgesics	14	11	_	2	12
Amphetamine + methamphetamine	_	_	_	_	_
All other drugs/combinations	453	290	55	178	220
Total	704	416	72	273	359

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Kansas City, MO



Metro area population, 2000 1,776,062 Percent of population covered by DAWN 37%

Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru	g abuse		
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
Kansas jurisdictions					
1. Johnson County, KS					451,086
2. Leavenworth County, K	S				68,691
3. Miami County, KS					28,351
4. Wyandotte County, KS					157,882
Missouri jurisdictions					
5. Cass County, MO					82,092
6. Clay County, MO					184,006
7. Clinton County, MO					18,979
8. Jackson County, MO	222	62	160	1,961	654,880
9. Lafayette County, MO					32,960
10. Platte County, MO					73,781
11. Ray County, MO					23,354
Total, participating (1)	222	62	160	1,961	654,880

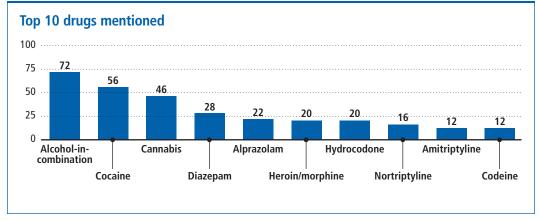
Areas that are shaded did not participate in DAWN in 2000.

Drug-related	deaths by sex	, age and race/et	thnicity		
Sex		Age		Race/Ethnicity	
Male	146	6-17	6	White	170
Female	75	18-24	22	Black	43
		25-34	36	Hispanic	9
		35-44	75	All others	—

83

45-97

		S	ex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	32%	39%	20%	17%	50%	36%	32%	28%
Number of drugs involved	l							
Single-drug	31%	27%	37%	50%	36%	28%	28%	33%
Multi-drug	69%	73%	63%	50%	64%	72%	72%	67%
Cause of death								
Drug-induced	28%	27%	31%	_	27%	42%	36%	17%
Drug-related	72%	73%	69%	100%	73%	58%	64%	83%
Manner of death								
Suicide	23%	23%	23%	33%	41%	31%	23%	14%
Accidental/unexpected	41%	45%	33%	33%	59%	47%	45%	29%
All others	36%	32%	44%	33%	·····	22%	32%	57%

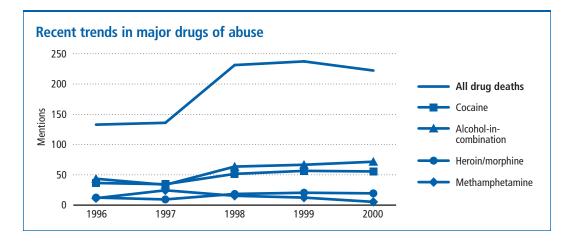


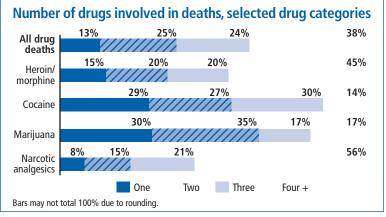
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	44	34	64	67	72	T -
Cocaine	37	35	52	57	56	16
Heroin/morphine	13	10	19	21	20	3
Marijuana	29	33	51	55	46	14
Amphetamines	11	24	16	14	5	_
Methamphetamine	12	25	16	13	6	2
Club drugs ¹		_	1	_	_	_
Hallucinogens ²	1	2	_	6	7	1
Inhalants	1	1	_	_	1	_
Narcotic analgesics ³	23	27	56	43	72	6
Other analgesics	5	5	10	14	8	_
Benzodiazepines	20	28	82	78	73	11
Antidepressants	36	36	45	73	80	9
All other substances ³	43	49	68	106	82	7
Total drug deaths	133	136	231	237	222	69
Total drug mentions	275	309	480	547	528	—
Total deaths certified	1,621	1,659	1,743	2,012	1,961	——————————————————————————————————————

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

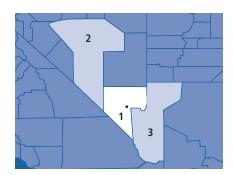
				Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others
Cocaine only	16	4	2	6	8
Alcohol + cocaine	12	6	2	10	
Heroin/morphine only	3	_	_	1	2
Alcohol + heroin/morphine	_	_	_	_	
Cocaine + heroin/morphine	_	_	_	_	_
Alcohol + cocaine + heroin/morphine	_	_	_	_	_
Narcotic analgesics only	6	1	1	3	2
Heroin/morphine + narcotic analgesics	2	_		1	1
Marijuana only	14	—	5	4	5
Alcohol + heroin/morphine + narcotic analgesics	_	_	_	_	_
Amphetamine + methamphetamine	2	_	1	1	_
All other drugs/combinations	167	51	40	64	63
Total	222	62	51	90	81

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Las Vegas, NV



Metro area population, 2000 1,563,282

Percent of population covered by DAWN

88%

Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru			
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
Nevada jurisdictions					
1. Clark County	286	142	144	7,378	1,375,765
2. Nye County					32,485
Arizona jurisdictions					
3. Mohave County					155,032
Total, participating (1)	286	142	144	7,378	1,375,765

Areas that are shaded did not participate in DAWN in 2000.

Drug-related deaths by sex, age and race/ethnicity Sex | Age | Race/E

 Male
 210

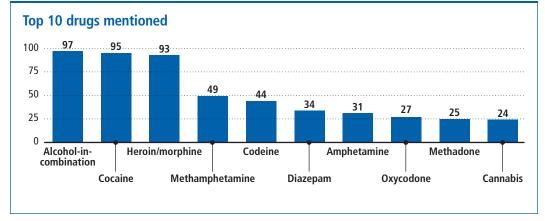
 Female
 76

Age		
6-17		5
18-24		12
25-34		49
35-44		82
45-97	1.	38

Race/Ethnicity	
White	225
Black	28
Hispanic	29
All others	4

Drug involvement in death by sex and age of decedent

		Sex		Age				
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	34%	38%	24%	20%	33%	41%	32%	33%
Number of drugs involved	I							
Single-drug	17%	20%	12%	40%	25%	12%	15%	20%
Multi-drug	83%	80%	88%	60%	75%	88%	85%	80%
Cause of death								
Drug-induced	50%	47%	57%	20%	42%	39%	54%	53%
Drug-related	50%	53%	43%	80%	58%	61%	46%	47%
Manner of death								
Suicide	27%	26%	29%	80%	50%	33%	20%	25%
Accidental/unexpected	35%	39%	26%	20%	33%	41%	37%	33%
All others	38%	35%	45%	—	17%	27%	44%	41%

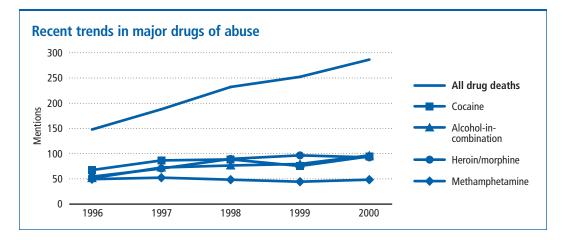


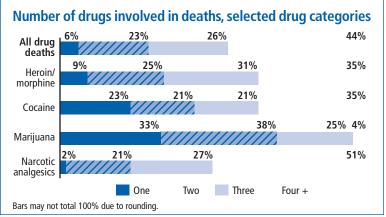
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	52	73	77	80	97	_
Cocaine	68	87	89	76	95	22
Heroin/morphine	55	71	90	97	93	8
Marijuana	2	3	1	2	24	8
Amphetamines	29	34	35	31	32	_
Methamphetamine	50	53	49	45	49	1
Club drugs ¹			1	4	8	1
Hallucinogens ²	1	4	2	3	_	_
Inhalants	_	_	_	_	_	_
Narcotic analgesics ³	36	63	119	126	146	3
Other analgesics	4	5	7	12	12	_
Benzodiazepines	32	59	62	66	100	1
Antidepressants	11	24	41	57	33	2
All other substances ³	17	31	68	78	93	4
Total drug deaths	148	188	232	252	286	50
Total drug mentions	357	507	641	677	782	_
Total deaths certified	5,032	5,799	6,716	7,165	7,378	_

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

				Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All other
Cocaine only	22	3	6	8	8
Alcohol + cocaine	8	_	1	3	4
Heroin/morphine only	8	_	2	1	5
Alcohol + heroin/morphine	9	6	_	8	1
Cocaine + heroin/morphine	6	5	_	5	1
Alcohol + cocaine + heroin/morphine	7	7	_	4	3
Narcotic analgesics only	3	2	1	2	
Heroin/morphine + narcotic analgesics	7	5		5	2
Marijuana only	8	—	2	5	1
Alcohol + heroin/morphine + narcotic analgesics	5	5	_	5	_
Amphetamine + methamphetamine	11	_	2	2	7
All other drugs/combinations	192	109	63	53	76
Total	286	142	77	101	108

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Long Island, NY



Metro area population, 2000 2,753,913 Percent of population covered by DAWN 100%

Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru			
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
1. Nassau County*	102	60	42	4,817	1,334,544
2. Suffolk County*	107	94	13	4,402	1,419,369
Total, participating (2)	209	154	55	9,219	2,753,913

* Indicates area featured in Spotlight section

Drug-related deaths by sex, age and race/ethnicity

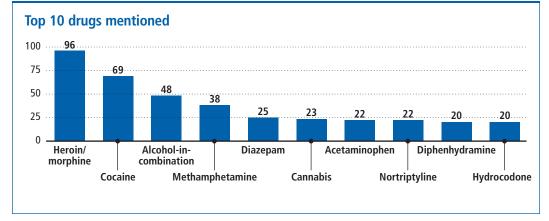
Sex		
Male	150	
Female	 44	

Age	
6-17	3
18-24	 19
25-34	 42
35-44	66
45-97	 79

Race/Ethnicity	
White	18
Black	2
Hispanic	
All others	

Drug involvement in death by sex and age of decedent

		S	ex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	23%	23%	14%	_	11%	36%	23%	20%
Number of drugs involved	I							
Single-drug	20%	22%	14%	67%	47%	10%	14%	22%
Multi-drug	80%	78%	86%	33%	53%	90%	86%	78%
Cause of death								
Drug-induced	74%	69%	84%	_	58%	81%	76%	75%
Drug-related	26%	31%	16%	100%	42%	19%	24%	25%
Manner of death								
Suicide	15%	7%	41%	_	16%	5%	11%	24%
Accidental/unexpected	72%	77%	55%	100%	79%	86%	74%	61%
All others	13%	16%	5%	<u> </u>	5%	10%	15%	15%

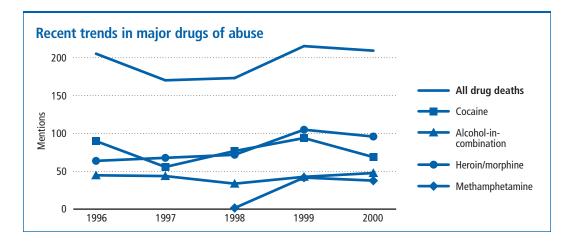


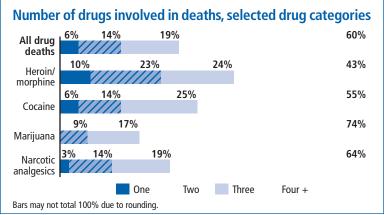
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	45	44	34	43	48	_
Cocaine	90	56	77	94	69	4
Heroin/morphine	64	68	72	105	96	10
Marijuana	63	67	23	43	23	_
Amphetamines			2		-	_
Methamphetamine			2	42	38	3
Club drugs ¹	1	1	2	1	3	1
Hallucinogens ²	1	_	2	9	10	_
Inhalants	2	3	5	1	3	_
Narcotic analgesics ³	49	40	42	69	73	2
Other analgesics	26	20	25	31	36	2
Benzodiazepines	58	29	33	36	31	_
Antidepressants	63	19	53	77	96	2
All other substances ³	91	70	108	102	108	17
Total drug deaths	205	170	173	215	209	41
Total drug mentions	553	417	480	653	634	_
Total deaths certified	9,369	9,161	8,950	8,884	9,219	—

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

				Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others
Cocaine only	4	_	_	3	1
Alcohol + cocaine	3	1	—	3	
Heroin/morphine only	10	9	_	9	1
Alcohol + heroin/morphine	—	_	_	_	
Cocaine + heroin/morphine	2	1	—	2	
Alcohol + cocaine + heroin/morphine	4	4	_	4	_
Narcotic analgesics only	2	1	_	2	—
Heroin/morphine + narcotic analgesics	6	5	_	6	_
Marijuana only	_	_	_	_	_
Alcohol + heroin/morphine + narcotic analgesics	_	_	_	_	_
Amphetamine + methamphetamine	_	_	_	_	_
All other drugs/combinations	178	133	31	122	25
Total	209	154	31	151	27

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Los Angeles, CA



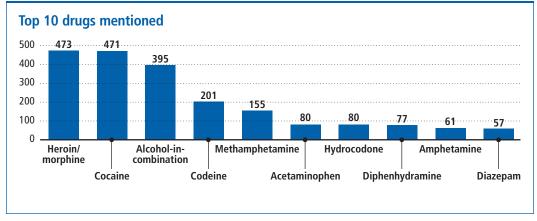
Metro area population, 2000 9,519,338 Percent of population covered by DAWN 100%

Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru			
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
1. Los Angeles County	1,192	686	506	8,537	9,519,338
Total, participating (1)	1,192	686	506	8,537	9,519,338

Sex		Age		Race/Ethnicity	
Male	866	6-17	10	White	599
Female	326	18-24	79	Black	222
		25-34	201	Hispanic	334
		35-44	420	All others	37
		45-97	482	***************************************	

		S	ex		Age			
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	33%	36%	26%	20%	33%	37%	34%	31%
Number of drugs involved	ł							
Single-drug	25%	25%	23%	40%	29%	20%	22%	28%
Multi-drug	75%	75%	77%	60%	71%	80%	78%	72%
Cause of death								
Drug-induced	58%	58%	57%	20%	35%	55%	63%	58%
Drug-related	42%	42%	43%	80%	65%	45%	37%	42%
Manner of death								
Suicide	19%	17%	24%	50%	25%	16%	18%	19%
Accidental/unexpected	73%	75%	67%	50%	67%	74%	75%	73%
All others	8%	8%	9%	—	8%	9%	7%	8%

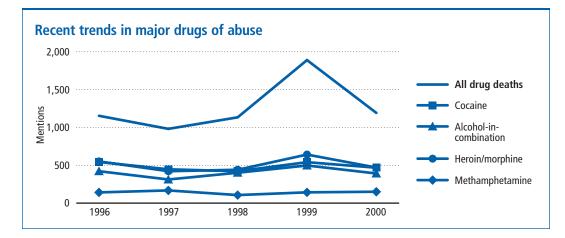


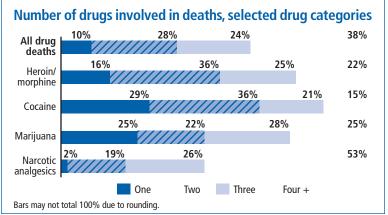
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	425	316	405	500	395	_
Cocaine	546	450	425	544	471	136
Heroin/morphine	554	425	444	644	473	76
Marijuana	9	12	17	24	32	8
Amphetamines	93	122	78	102	61	_
Methamphetamine	146	172	111	147	155	12
Club drugs ¹	_	2	6	18	27	11
Hallucinogens ²	38	20	13	25	22	3
Inhalants	13	12	28	70		_
Narcotic analgesics ³	341	292	315	530	407	9
Other analgesics	32	34	58	95	115	3
Benzodiazepines	155	132	182	213	142	5
Antidepressants	244	191	248	441	293	11
All other substances ³	339	361	506	1,175	392	21
Total drug deaths	1,154	982	1,134	1,887	1,192	295
Total drug mentions	2,935	2,541	2,836	4,528	2,985	_
Total deaths certified	9,485	6,627	5,439	9,133	8,537	

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

		1 1		Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others
Cocaine only	136	33	15	101	20
Alcohol + cocaine	84	23	13	63	8
Heroin/morphine only	76	42	8	65	3
Alcohol + heroin/morphine	60	55	1	57	2
Cocaine + heroin/morphine	50	42	1	49	<u> </u>
Alcohol + cocaine + heroin/morphine	40	38	_	40	_
Narcotic analgesics only	9	3	6	3	_
Heroin/morphine + narcotic analgesics	41	35	2	38	1
Marijuana only	8	—	3	3	2
Alcohol + heroin/morphine + narcotic analgesics	24	24	1	23	_
Amphetamine + methamphetamine	25	8	1	23	1
All other drugs/combinations	639	383	174	408	57
Total	1,192	686	225	873	94

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Louisville, KY



Metro area population, 2000 1,025,598 Percent of population covered

Percent of population covered by DAWN 68%

Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru	g abuse	Total	Total
Metro area component	TOTAL	Drug- induced	Drug- related	deaths certified	population (2000)
Kentucky jurisdictions					
1. Bullitt County					61,236
2. Jefferson County	109	48	61	3,974	693,604
3. Oldham County					46,178
Indiana jurisdictions					
4. Clark County					96,472
5. Floyd County					70,823
6. Harrison County					34,325
7. Scott County					22,960
Total, participating (1)	109	48	61	3,974	693,604

Areas that are shaded did not participate in DAWN in 2000.

Drug-related deaths by sex, age and race/ethnicity

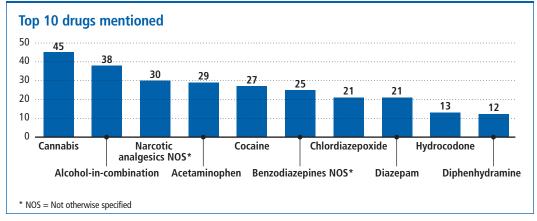
Sex	
Male	89
Female	 20

Age	
6-17	2
18-24	12
25-34	26
35-44	41
45-97	28

Race/Ethnicity	
White	93
Black	16
Hispanic	_
All others	

Drug involvement in death by sex and age of decedent

		S	ex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	35%	39%	15%	50%	25%	46%	37%	25%
Number of drugs involved	ı							
Single-drug	16%	17%	10%	_	25%	15%	20%	7%
Multi-drug	84%	83%	90%	100%	75%	85%	80%	93%
Cause of death								
Drug-induced	44%	40%	60%	50%	25%	42%	41%	57%
Drug-related	56%	60%	40%	50%	75%	58%	59%	43%
Manner of death								
Suicide	30%	33%	20%	50%	50%	42%	22%	21%
Accidental/unexpected	45%	43%	55%	—	50%	50%	44%	43%
All others	25%	25%	25%	50%	·····	8%	34%	36%

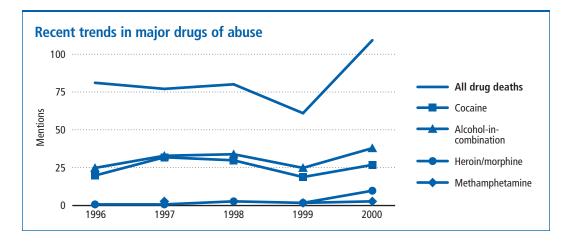


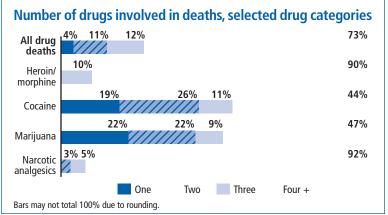
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	25	33	34	25	38	_
Cocaine	20	32	30	19	27	5
Heroin/morphine	1	1	3	2	10	_
Marijuana	19	29	29	16	45	10
Amphetamines	1	4		2	8	_
Methamphetamine		3		2	3	_
Club drugs ¹					1	_
Hallucinogens ²	_	_	1	_	_	_
Inhalants	1	1	2	_	5	1
Narcotic analgesics ³	46	24	40	50	77	_
Other analgesics	15	18	22	18	34	_
Benzodiazepines	31	18	33	29	67	_
Antidepressants	35	26	28	31	37	_
All other substances ³	50	25	37	39	36	1
Total drug deaths	81	77	80	61	109	17
Total drug mentions	244	214	259	233	388	_
Total deaths certified	3,638	3,676	3,710	3,822	3,974	_

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

				Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All other
Cocaine only	5	_	1	_	4
Alcohol + cocaine	4	1	1	3	_
Heroin/morphine only	_	_	_	_	
Alcohol + heroin/morphine	_	_	_	_	
Cocaine + heroin/morphine	_	_	_	_	
Alcohol + cocaine + heroin/morphine	_	_	_	_	_
Narcotic analgesics only	—	_		_	
Heroin/morphine + narcotic analgesics	_	_	_	_	_
Marijuana only	10	_	4	5	1
Alcohol + heroin/morphine + narcotic analgesics	_	_	_	_	_
Amphetamine + methamphetamine	_	_	_	_	_
All other drugs/combinations	90	47	27	41	22
Total	109	48	33	49	27

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Miami, FL



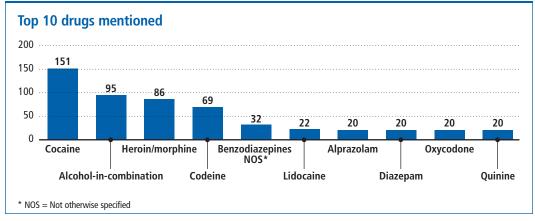
Metro area population, 2000 2,253,362 Percent of population covered by DAWN 100%

Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru	ıg abuse		
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
1. Miami-Dade County	216	112	104	2,999	2,253,362
Total, participating (1)	216	112	104	2,999	2,253,362

Sex		Age		Race/Ethnicity	
Male	169	6-17	4	White	93
Female	46	18-24	19	Black	62
		25-34	36	Hispanic	6
		35-44	65	All others	_
		45-97	92	***************************************	

Drug involvement in death by sex and age of decedent Sex Age TOTAL Female 6-17 18-24 25-34 35-44 45-97 Male 44% Alcohol involved 50% 24% 25% 26% 50% 45% 46% Number of drugs involved Single-drug 13% 13% 11% 26% 14% 11% 8% 88% Multi-drug 87% 89% 100% 74% 92% 86% 89% Cause of death Drug-induced 52% 49% 61% 67% 50% 63% 49% 46% Drug-related 48% 51% 39% 50% 37% 33% 51% 54% Manner of death Suicide 18% 12% 37% 26% 8% 20% 20% 67% Accidental/unexpected 62% 43% 100% 68% 83% 63% 49% All others 20% 21% 8% 17% 32% 20%

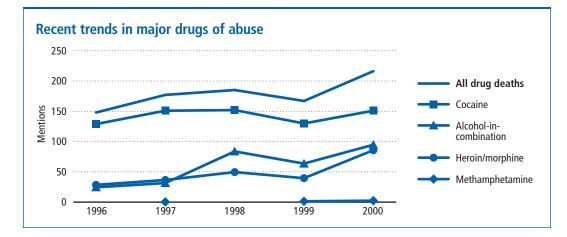


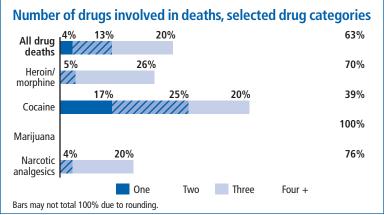
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	25	32	84	64	95	_
Cocaine	129	151	152	130	151	25
Heroin/morphine	29	37	50	40	86	_
Marijuana	1	4	2	3	1	_
Amphetamines				3	4	_
Methamphetamine		1		2	3	_
Club drugs ¹	1			5	9	_
Hallucinogens ²					—	_
Inhalants	1	2	2	2	—	_
Narcotic analgesics ³	29	28	49	54	126	_
Other analgesics	25	25	27	22	24	_
Benzodiazepines	31	48	38	48	92	_
Antidepressants	13	23	18	25	27	1
All other substances ³	77	77	90	81	102	1
Total drug deaths	148	177	185	167	216	27
Total drug mentions	361	428	512	479	720	_
Total deaths certified	3,328	3,183	3,105	3,081	2,999	_

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

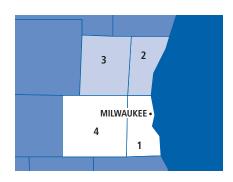
		1 1		Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others
Cocaine only	25	4	5	10	10
Alcohol + cocaine	27	2	5	17	5
Heroin/morphine only	_	_	_	_	
Alcohol + heroin/morphine	2	2		2	
Cocaine + heroin/morphine	—	—		_	
Alcohol + cocaine + heroin/morphine	2	2	_	2	_
Narcotic analgesics only	_	_	_	_	_
Heroin/morphine + narcotic analgesics	2	2	_	2	_
Marijuana only	—	—	—	_	
Alcohol + heroin/morphine + narcotic analgesics	7	7	_	7	_
Amphetamine + methamphetamine	_	_	_	_	_
All other drugs/combinations	151	93	29	93	29
Total	216	112	39	133	44

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Milwaukee, WI



Metro area population, 2000 1,500,741

Percent of population covered by DAWN

87%

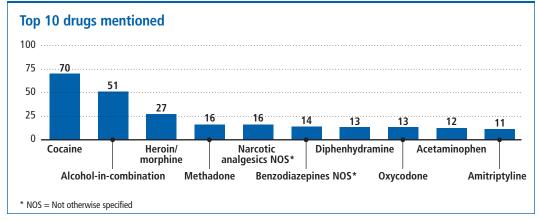
Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru	g abuse		
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
1. Milwaukee County*	110	89	21	1,936	940,164
2. Ozaukee County					82,317
3. Washington County					117,493
4. Waukesha County	21	13	8	285	360,767
Total, participating (2)	131	102	29	2,221	1,300,931

Areas that are shaded did not participate in DAWN in 2000.

Sex		Age		Race/Ethnicity	
Male	92	6-17	1	White	72
Female	39	18-24	5	Black	43
		25-34	22	Hispanic	14
		35-44	52	All others	2
		45-97	51	***************************************	

		S	ex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	39%	45%	26%	_	60%	41%	33%	43%
Number of drugs involved	ł							
Single-drug	17%	20%	10%	_	40%	9%	17%	18%
Multi-drug	83%	80%	90%	100%	60%	91%	83%	82%
Cause of death								
Drug-induced	78%	78%	77%	100%	40%	73%	79%	82%
Drug-related	22%	22%	23%	_	60%	27%	21%	18%
Manner of death								
Suicide	24%	12%	51%	100%	40%	23%	21%	24%
Accidental/unexpected	63%	75%	33%	<u> </u>	60%	64%	65%	61%
All others	14%	13%	15%	—		14%	13%	16%



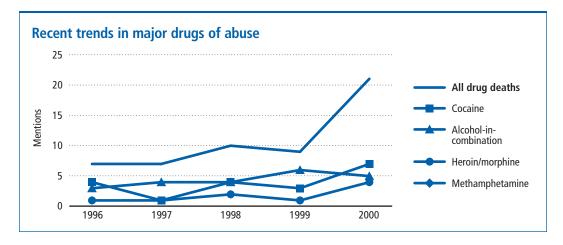
^{*} Indicates area featured in Spotlight section

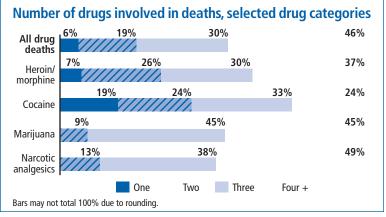
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	3	4	4	6	5	_
Cocaine	4	1	4	3	7	1
Heroin/morphine	1	1	2	1	4	—
Marijuana	3	2	2	4	6	_
Amphetamines	-	-	—	—	—	_
Methamphetamine			—	—		—
Club drugs ¹	-	-	—	—	_	_
Hallucinogens ²	-	-	—	—	_	_
Inhalants					1	1
Narcotic analgesics ³	1	2	5	—	9	—
Other analgesics		2	3	—	4	—
Benzodiazepines		2	4	—	6	—
Antidepressants	5	2	6	4	4	—
All other substances ³	2	2	·····	3	12	2
Total drug deaths	7	7	10	9	21	4
Total drug mentions	19	18	30	21	58	—
Total deaths certified	1,149	1,338	493	231	285	_

Because Milwaukee County did not participate in DAWN prior to 2000, this table shows data only for Waukesha County. Data for Milwaukee County are provided in the Spotlight section of this report.

				Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others
Cocaine only	13	6	1	8	4
Alcohol + cocaine	10	5	3	7	_
Heroin/morphine only	2	2	_	2	_
Alcohol + heroin/morphine	2	2	_	2	_
Cocaine + heroin/morphine	3	3		3	
Alcohol + cocaine + heroin/morphine	3	3	_	3	_
Narcotic analgesics only	_	_	_	_	_
Heroin/morphine + narcotic analgesics	2	2	1	1	_
Marijuana only	_	_	_	_	_
Alcohol + heroin/morphine + narcotic analgesics	_	_	_	_	_
Amphetamine + methamphetamine	_	_	_	_	_
All other drugs/combinations	96	79	26	56	14
Total	131	102	31	82	18

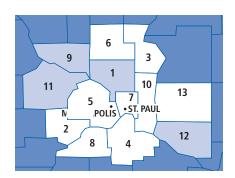
^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

Minneapolis-St. Paul, MN



Metro area population, 2000 2,968,806

Percent of population covered by DAWN

84%

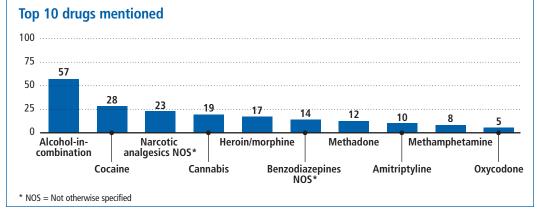
Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru	g abuse		
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
Minnesota jurisdictions					
1. Anoka County					298,084
2. Carver County	_	_	_	41	70,205
3. Chisago County	1	1	_	42	41,101
4. Dakota County	15	4	11	175	355,904
5. Hennepin County*	52	48	4	1,314	1,116,200
6. Isanti County	_	_	_	206	31,287
7. Ramsey County*	36	18	18	1,344	511,035
8. Scott County	4	2	2	66	89,498
9. Sherburne County					64,417
10. Washington County	5	4	1	208	201,130
11. Wright County					89,986
Wisconsin jurisdictions					
12. Pierce County					36,804
13. St. Croix County	2	1	1	211	63,155
Total, participating (9)	115	78	37	3,607	2,479,515

Areas that are shaded did not participate in DAWN in 2000.

Sex		Age		Race/Ethnicity	
Male	81	6-17	2	White	83
Female	31	18-24	6	Black	2
		25-34	25	Hispanic	
		35-44	44	All others	
		45-97	38	***************************************	

		S	ex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	50%	56%	29%	_	50%	44%	52%	53%
Number of drugs involved	I							
Single-drug	31%	27%	45%	100%	33%	28%	25%	37%
Multi-drug	69%	73%	55%	_	67%	72%	75%	63%
Cause of death								
Drug-induced	68%	67%	77%	100%	50%	64%	68%	71%
Drug-related	32%	33%	23%	—	50%	36%	32%	29%
Manner of death								
Suicide	27%	17%	45%	_	17%	16%	23%	42%
Accidental/unexpected	56%	63%	42%	100%	67%	60%	66%	37%
All others	17%	20%	13%	—	17%	24%	11%	21%



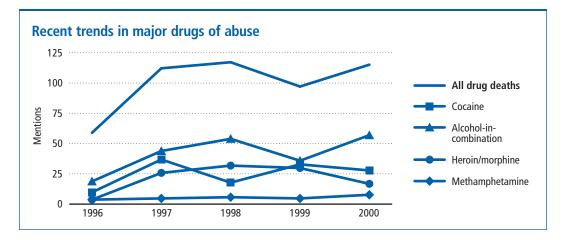
^{*} Indicates area featured in Spotlight section

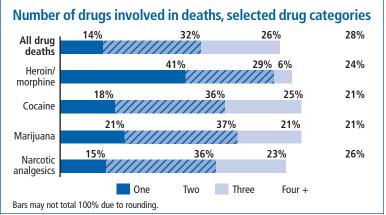
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	19	44	54	36	57	_
Cocaine	10	37	18	33	28	5
Heroin/morphine	4	26	32	30	17	7
Marijuana	18	25	25	14	19	4
Amphetamines	3	5	6	3	3	_
Methamphetamine	4	5	6	5	8	1
Club drugs ¹			1	3	6	2
Hallucinogens ²		1	—		_	_
Inhalants	_	1	_	_	_	_
Narcotic analgesics ³	12	34	29	37	47	7
Other analgesics	9	11	11	10	7	2
Benzodiazepines	7	18	9	12	24	1
Antidepressants	17	16	35	30	17	5
All other substances ³	15	35	35	19	21	2
Total drug deaths	59	112	117	97	115	36
Total drug mentions	118	258	261	232	254	
Total deaths certified	3,534	3,559	3,592	3,452	3,607	

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

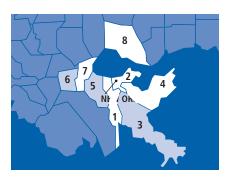
				Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others
Cocaine only	5	3	_	3	2
Alcohol + cocaine	8	_	2	2	4
Heroin/morphine only	7	5	1	6	_
Alcohol + heroin/morphine	4	4	_	4	_
Cocaine + heroin/morphine	_	_	_	_	
Alcohol + cocaine + heroin/morphine	1	1	_	1	_
Narcotic analgesics only	7	5	1	4	2
Heroin/morphine + narcotic analgesics	1	1	_	1	_
Marijuana only	4	_	2	1	1
Alcohol + heroin/morphine + narcotic analgesics	_	_	_	_	_
Amphetamine + methamphetamine	1	1	_	1	_
All other drugs/combinations	77	58	25	41	11
Total	115	78	31	64	20

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





New Orleans, LA



Metro area population, 2000 1,337,726

Percent of population covered by DAWN 93%

Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru			
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
1. Jefferson Parish	84	65	19	2,929	455,466
2. Orleans Parish*	103	72	31	1,844	484,674
3. Plaquemines Parish					26,757
4. St. Bernard Parish	19	12	7	83	67,229
5. St. Charles Parish					48,072
6. St. James Parish					21,216
7. St. John Baptist Parish	_	_	_	135	43,044
8. St. Tammany Parish	36	11	25	231	191,268
Total, participating (5)	242	160	82	5,222	1,241,681

Areas that are shaded did not participate in DAWN in 2000.

Drug-related deaths by sex, age and race/ethnicity

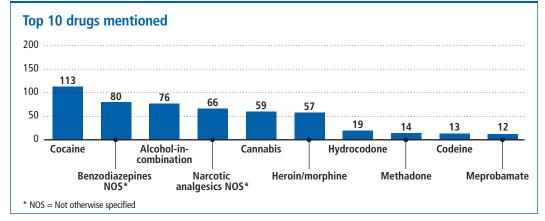
Sex	
Male	188
Female	51

Age	
6-17	2
18-24	31
25-34	62
35-44	84
45-97	63

Race/Ethnicity	
White	16
Black	7.
Hispanic	
All others	

Drug involvement in death by sex and age of decedent

		S	ex	Age				
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	31%	32%	27%	50%	19%	34%	35%	30%
Number of drugs involved	I							
Single-drug	19%	19%	16%	_	29%	18%	10%	27%
Multi-drug	81%	81%	84%	100%	71%	82%	90%	73%
Cause of death								
Drug-induced	66%	63%	78%	50%	71%	58%	73%	63%
Drug-related	34%	37%	22%	50%	29%	42%	27%	37%
Manner of death								
Suicide	17%	13%	35%	_	13%	27%	12%	17%
Accidental/unexpected	52%	57%	35%	100%	61%	44%	60%	46%
All others	30%	30%	29%	·····	26%	29%	29%	37%



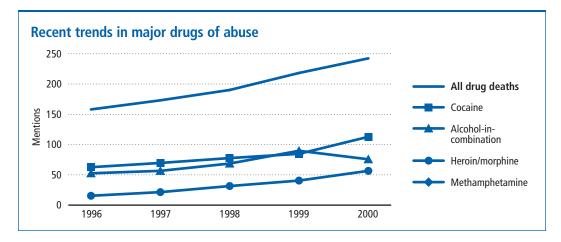
^{*} Indicates area featured in Spotlight section

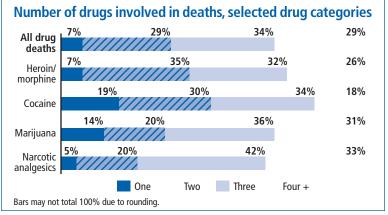
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	53	57	69	90	76	_
Cocaine	63	70	78	85	113	21
Heroin/morphine	16	22	32	41	57	4
Marijuana	26	28	51	59	59	8
Amphetamines	3	5	7	7	4	_
Methamphetamine					_	_
Club drugs ¹	1		1	4	3	_
Hallucinogens ²	1	1		1	2	_
Inhalants	_	1	_	1	_	_
Narcotic analgesics ³	45	63	78	130	135	7
Other analgesics	25	35	16	13	10	_
Benzodiazepines	33	36	60	69	82	1
Antidepressants	13	10	6	26	15	_
All other substances ³	71	97	50	81	48	4
Total drug deaths	158	173	190	218	242	45
Total drug mentions	350	425	448	607	604	
Total deaths certified	5,699	5,100	5,240	5,161	5,222	

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

				Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others
Cocaine only	21	12	2	12	7
Alcohol + cocaine	18	9	1	13	4
Heroin/morphine only	4	3	_	1	3
Alcohol + heroin/morphine	9	8	_	5	4
Cocaine + heroin/morphine	7	7	_	5	2
Alcohol + cocaine + heroin/morphine	6	6	_	2	4
Narcotic analgesics only	7	4	2	4	1
Heroin/morphine + narcotic analgesics	3	3	_	1	2
Marijuana only	8	_	2	5	1
Alcohol + heroin/morphine + narcotic analgesics	1	1	_	1	_
Amphetamine + methamphetamine	_	_	_	_	_
All other drugs/combinations	158	107	35	78	45
Total	242	160	42	127	73

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





New York, NY



Metro area population, 2000 9,314,235

Percent of population covered by DAWN 87%

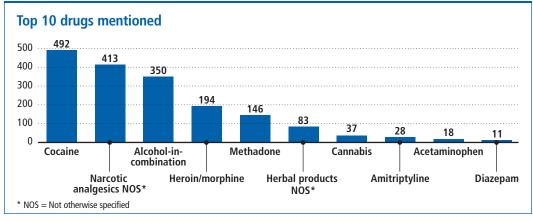
Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru	g abuse		
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
1. Bronx County*	239	169	70	1,730	1,332,650
2. Kings County*	261	218	43	2,571	2,465,326
3. New York County*	246	184	62	2,496	1,537,195
4. Putnam County	1	1	_	163	95,745
5. Queens County*	150	117	33	1,850	2,229,379
6. Richmond County*	27	24	3	271	443,728
7. Rockland County					286,753
8. Westchester County					923,459
Total, participating (6)	924	713	211	9,081	8,104,023

Areas that are shaded did not participate in DAWN in 2000.

Drug-related deaths by sex, age and race/ethnicity Sex Age Race/Ethnicity 691 6-17 2 White 365 Male 227 47 Black 321 Female 18-24 25-34 169 229 Hispanic 9 35-44 353 All others 45-97 353

		S	ex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	38%	41%	29%	_	38%	37%	40%	36%
Number of drugs involved	ł							
Single-drug	31%	29%	36%	50%	15%	31%	30%	33%
Multi-drug	69%	71%	64%	50%	85%	69%	70%	67%
Cause of death								
Drug-induced	77%	78%	76%	100%	77%	84%	80%	71%
Drug-related	23%	22%	24%	·····	23%	16%	20%	29%
Manner of death								
Suicide	8%	7%	10%	_	21%	7%	6%	8%
Accidental/unexpected	76%	80%	67%	100%	77%	84%	80%	69%
All others	16%	14%	23%	·····	2%	9%	14%	23%



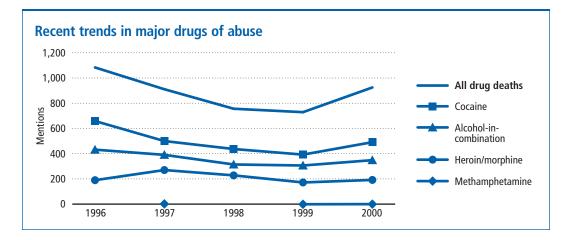
^{*} Indicates area featured in Spotlight section

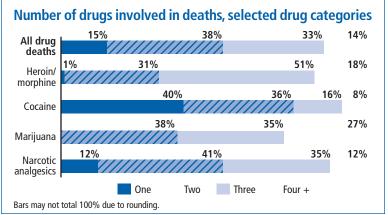
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	433	392	316	308	350	_
Cocaine	659	501	438	394	492	196
Heroin/morphine	192	272	230	174	194	1
Marijuana	114	39	30	19	37	_
Amphetamines	3	1	_	_	1	_
Methamphetamine		5	—	2	3	1
Club drugs ¹	2	7	2	4	5	1
Hallucinogens ²	4	1	_	3	6	1
Inhalants	2	_	_	_	_	_
Narcotic analgesics ³	511	335	252	271	590	69
Other analgesics	27	30	31	23	30	6
Benzodiazepines	57	35	6	12	25	_
Antidepressants	81	62	38	33	54	3
All other substances ³	157	59	25	74	128	6
Total drug deaths	1,082	910	756	729	924	284
Total drug mentions	2,242	1,739	1,368	1,317	1,915	_
Total deaths certified	10,495	9,644	9,275	9,470	9,081	

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

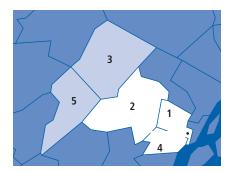
				Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All other
Cocaine only	196	123	10	147	39
Alcohol + cocaine	101	62	16	73	12
Heroin/morphine only	1	_	_	1	_
Alcohol + heroin/morphine	_	_	_	_	_
Cocaine + heroin/morphine	_	_	_	_	_
Alcohol + cocaine + heroin/morphine	_	_	_	_	_
Narcotic analgesics only	69	52	4	47	18
Heroin/morphine + narcotic analgesics	60	53		56	4
Marijuana only	—	—		—	
Alcohol + heroin/morphine + narcotic analgesics	74	72	_	73	1
Amphetamine + methamphetamine	_	_	_	_	_
All other drugs/combinations	423	351	40	307	76
Total	924	713	70	704	150

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Newark, NJ



Metro area population, 2000 2,032,989 Percent of population covered by DAWN 88%

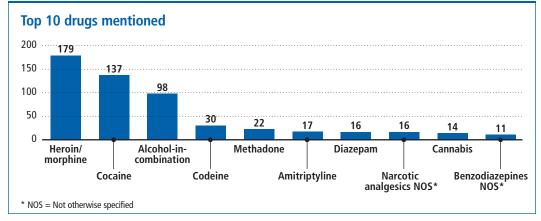
Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru	g abuse		
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
1. Essex County*	158	129	29	2,487	793,633
2. Morris County	33	27	6	935	470,212
3. Sussex County					144,166
4. Union County	59	47	12	1,380	522,541
5. Warren County					102,437
Total, participating (3)	250	203	47	4,802	1,786,386

Areas that are shaded did not participate in DAWN in 2000.

Drug-related deaths by sex, age and race/ethnicity Sex Age Race/Ethnicity Male 187 6-17 2 White 107 63 23 Black Female 18-24 113 56 25-34 26 Hispanic 35-44 All others 112 4 45-97 57

		S	ex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	39%	42%	30%	_	26%	38%	46%	33%
Number of drugs involved	l							
Single-drug	20%	21%	17%	100%	9%	20%	20%	23%
Multi-drug	80%	79%	83%	_	91%	80%	80%	77%
Cause of death								
Drug-induced	81%	81%	81%	_	78%	88%	85%	72%
Drug-related	19%	19%	19%	100%	22%	13%	15%	28%
Manner of death								
Suicide	5%	5%	3%	_	9%	2%	3%	11%
Accidental/unexpected	90%	89%	90%	100%	91%	95%	89%	84%
All others	6%	5%	6%	—	—	4%	8%	5%



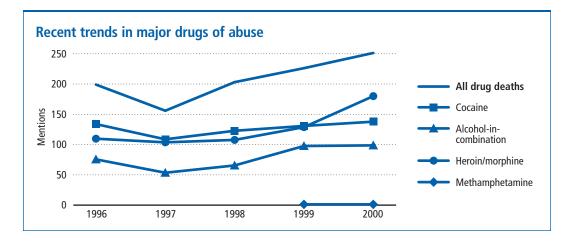
^{*} Indicates area featured in Spotlight section

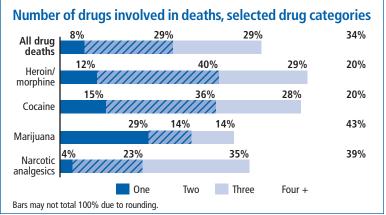
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	75	53	65	97	98	_
Cocaine	133	108	122	130	137	21
Heroin/morphine	109	103	107	128	179	21
Marijuana	16	22	21	21	14	4
Amphetamines	—	_	1	1	_	_
Methamphetamine	—	_	_	1	1	_
Club drugs ¹			_	1	1	_
Hallucinogens ²			_		1	_
Inhalants			_		1	_
Narcotic analgesics ³	22	14	54	44	75	3
Other analgesics	9	5	22	15	13	_
Benzodiazepines	29	14	31	49	35	_
Antidepressants	17	20	34	25	48	1
All other substances ³	12	8	15	24	23	_
Total drug deaths	198	155	202	225	250	50
Total drug mentions	422	347	472	536	626	_
Total deaths certified	5,013	4,682	5,022	5,039	4,802	_

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

				Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others
Cocaine only	21	14	2	19	_
Alcohol + cocaine	13	9	_	13	_
Heroin/morphine only	21	17	1	20	_
Alcohol + heroin/morphine	18	17	1	17	_
Cocaine + heroin/morphine	33	27	_	32	1
Alcohol + cocaine + heroin/morphine	18	17	_	18	_
Narcotic analgesics only	3	2	_	3	_
Heroin/morphine + narcotic analgesics	11	8	_	9	2
Marijuana only	4	1	1	3	_
Alcohol + heroin/morphine + narcotic analgesics	8	8		8	
Amphetamine + methamphetamine	_	_	_	_	_
All other drugs/combinations	100	83	7	82	11
Total	250	203	12	224	14

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Norfolk, VA



Metro area population, 2000 1,569,541

Percent of population covered by DAWN 48%

Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru	g abuse		
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
Virginia jurisdictions					
1. Chesapeake City					199,184
2. Gloucester County					34,780
3. Hampton City					146,437
4. Isle of Wight County					29,728
5. James City County					48,102
6. Mathews County					9,207
7. Newport News City					180,150
8. Norfolk City	20	16	4	324	234,403
9. Poquoson City					11,566
10. Portsmouth City	5	5	_	105	100,565
11. Suffolk City					63,677
12. Virginia Beach City	15	14	1	172	425,257
13. Williamsburg City					11,998
14. York County					56,297
North Carolina jurisdiction	ns				
15. Currituck County					18,190
Total, participating (3)	40	35	5	601	760,225

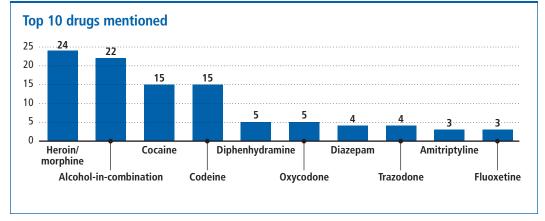
Areas that are shaded did not participate in DAWN in 2000.

Sex		Age	
Male	25	6-17	1
Female	15	18-24	7
		25-34	5
		35-44	19
		45-97	8

White	2
Black	1
Hispanic	

Drug involvement in death by sex and age of decedent

	TOTAL	Sex		Age				
		Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	55%	68%	33%	_	43%	80%	58%	50%
Number of drugs involved	I							
Single-drug	8%	8%	7%	_	14%	_	11%	_
Multi-drug	93%	92%	93%	100%	86%	100%	89%	100%
Cause of death								
Drug-induced	88%	92%	80%	100%	100%	80%	84%	88%
Drug-related	13%	8%	20%	_	_	20%	16%	13%
Manner of death								
Suicide	18%	12%	27%	_	29%	40%	16%	_
Accidental/unexpected	83%	88%	73%	100%	71%	60%	84%	100%
All others	—	—	—	—	—	·····	—	—



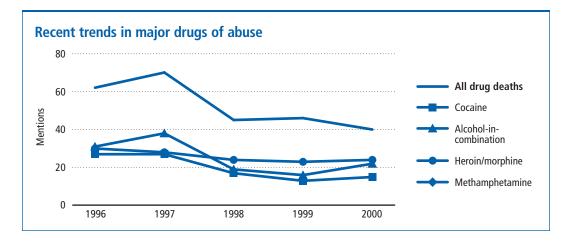
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	31	38	19	16	22	_
Cocaine	27	27	17	13	15	_
Heroin/morphine	30	28	24	23	24	3
Marijuana	3	7	1			_
Amphetamines			_			_
Methamphetamine			_			_
Club drugs ¹			_			_
Hallucinogens ²		—	—	_		_
Inhalants	1	1	_			_
Narcotic analgesics ³	8	16	17	15	28	_
Other analgesics	1	1	3	3	3	_
Benzodiazepines	11	8	4	6	5	_
Antidepressants	7	15	14	9	18	_
All other substances ³	10	19	10	11	17	_
Total drug deaths	62	70	45	46	40	3
Total drug mentions	129	160	109	96	132	_
Total deaths certified	835	835	757	607	601	_

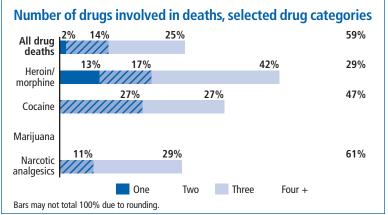
¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

Selected drug combinations by cause and manner of death

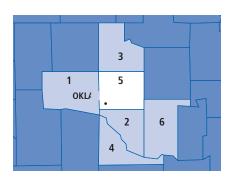
				Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others
Cocaine only	_	_	_	_	_
Alcohol + cocaine	2	1	_	2	_
Heroin/morphine only	3	3	1	2	_
Alcohol + heroin/morphine	—	_	—	_	_
Cocaine + heroin/morphine	2	2	—	2	—
Alcohol + cocaine + heroin/morphine	2	2	_	2	_
Narcotic analgesics only	_	_	_	_	_
Heroin/morphine + narcotic analgesics	2	2	_	2	_
Marijuana only	—	_	_	_	_
Alcohol + heroin/morphine + narcotic analgesics	6	6	_	6	_
Amphetamine + methamphetamine	_	_	_	<u>—</u>	_
All other drugs/combinations	23	19	6	17	
Total	40	35	7	33	_

* This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Oklahoma City, OK



Metro area population, 2000 1,083,346

Percent of population covered by DAWN

61%

Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru			
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
1. Canadian County					87,697
2. Cleveland County					208,016
3. Logan County					33,924
4. McClain County					27,740
5. Oklahoma County	196	128	68	3,319	660,448
6. Pottawatomie County					65,521
Total, participating (1)	196	128	68	3,319	660,448

Areas that are shaded did not participate in DAWN in 2000.

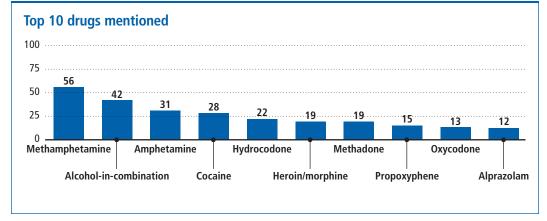
Drug-related deaths by sex, age and race/ethnicity

Sex	
Male	138
Female	58

Age	
6-17	5
18-24	 9
25-34	 49
35-44	 81
45-97	 52

Race/Ethnicity	
White	164
Black	17
Hispanic	2
All others	13

		S	ex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	21%	26%	10%	_	11%	31%	20%	19%
Number of drugs involved	I							
Single-drug	31%	31%	31%	20%	44%	16%	31%	44%
Multi-drug	69%	69%	69%	80%	56%	84%	69%	56%
Cause of death								
Drug-induced	65%	62%	72%	20%	56%	63%	68%	69%
Drug-related	35%	38%	28%	80%	44%	37%	32%	31%
Manner of death								
Suicide	29%	25%	38%	_	33%	33%	25%	35%
Accidental/unexpected	42%	45%	36%	80%	44%	39%	46%	37%
All others	29%	30%	26%	20%	22%	29%	30%	29%



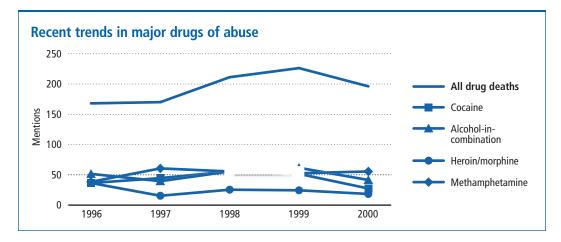
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	52	40	56	62	42	_
Cocaine	37	45	56	52	28	13
Heroin/morphine	37	16	26	25	19	8
Marijuana	1		_		—	_
Amphetamines	15	44	44	37	31	_
Methamphetamine	39	61	56	53	56	12
Club drugs ¹			_		1	1
Hallucinogens ²		1	1		1	_
Inhalants	12	6	11	5	11	3
Narcotic analgesics ³	40	34	53	97	78	13
Other analgesics	21	13	26	23	15	2
Benzodiazepines	43	20	23	35	27	_
Antidepressants	51	38	57	73	23	2
All other substances ³	44	17	41	66	44	7
Total drug deaths	168	170	211	226	196	61
Total drug mentions	392	335	450	528	376	_
Total deaths certified	3,089	3,273	3,313	3,420	3,319	_

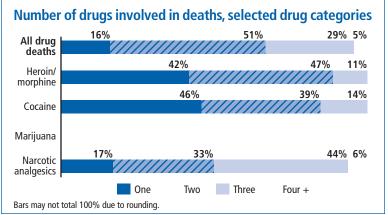
¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

Selected drug combinations by cause and manner of death

				Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All other
Cocaine only	13	3	1	4	8
Alcohol + cocaine	8	3	4	2	2
Heroin/morphine only	8	8	1	6	1
Alcohol + heroin/morphine	3	3	—	3	
Cocaine + heroin/morphine	—	—	—	_	
Alcohol + cocaine + heroin/morphine	_	_	_	_	_
Narcotic analgesics only	13	13	3	6	4
Heroin/morphine + narcotic analgesics	2	2	_	2	_
Marijuana only	·····	—	·····	·····	····
Alcohol + heroin/morphine + narcotic analgesics	_	<u> </u>	_	_	_
Amphetamine + methamphetamine	28	3	5	12	11
All other drugs/combinations	121	93	43	48	30
Total	196	128	57	83	56

* This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Omaha, NE



Metro area population, 2000 716,998 Percent of population covered by DAWN 84%

Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru			
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
Nebraska jurisdictions					
1. Cass County					24,334
2. Douglas County	61	15	46	2,729	463,585
3. Sarpy County	1	1	_	275	122,595
4. Washington County	_	_	_	17	18,780
Iowa jurisdictions					
5. Pottawattamie County					87,704
Total, participating (3)	62	16	46	3,021	604,960

Areas that are shaded did not participate in DAWN in 2000.

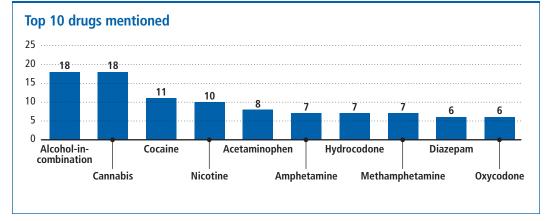
Drug-related deaths by sex, age and race/ethnicity

Sex	
Male	45
Female	17

Age	
6-17	2
18-24	8
25-34	18
35-44	16
45-97	18

Race/Ethnicity	
White	44
Black	10
Hispanic	4
All others	4

		S	ex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	29%	29%	29%	_	13%	28%	44%	28%
Number of drugs involved	ł							
Single-drug	21%	22%	18%	50%	_	28%	31%	11%
Multi-drug	79%	78%	82%	50%	100%	72%	69%	89%
Cause of death								
Drug-induced	26%	27%	24%	50%	25%	11%	25%	39%
Drug-related	74%	73%	76%	50%	75%	89%	75%	61%
Manner of death								
Suicide	32%	31%	35%	50%	63%	28%	25%	28%
Accidental/unexpected	24%	29%	12%	50%	25%	17%	19%	33%
All others	44%	40%	53%		13%	56%	56%	39%

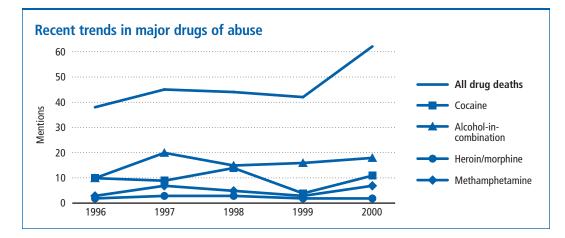


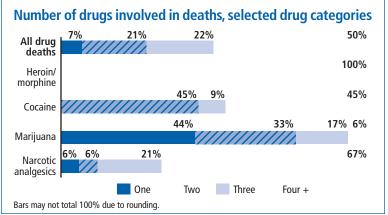
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	10	20	15	16	18	_
Cocaine	10	9	14	4	11	_
Heroin/morphine	2	3	3	2	2	_
Marijuana	11	18	12	16	18	8
Amphetamines	3	4	5	3	7	_
Methamphetamine	3	7	5	3	7	_
Club drugs ¹					—	_
Hallucinogens ²					—	_
Inhalants	_	_	1	_	_	_
Narcotic analgesics ³	11	13	21	13	33	2
Other analgesics	9	8	8	8	12	_
Benzodiazepines	3	6	14	8	11	_
Antidepressants	22	14	12	18	17	2
All other substances ³	18	9	29	18	39	1
Total drug deaths	38	45	44	42	62	13
Total drug mentions	102	111	139	109	175	_
Total deaths certified	2,963	3,014	2,999	3,078	3,021	_

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

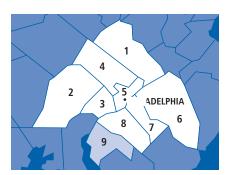
	Mann			Manner	er	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All other	
Cocaine only	_	_	_	_	_	
Alcohol + cocaine	1	_	_	_	1	
Heroin/morphine only	_	_	_	_	_	
Alcohol + heroin/morphine		_	_	_	_	
Cocaine + heroin/morphine	_	_	_	_	_	
Alcohol + cocaine + heroin/morphine	_	_	_	_	_	
Narcotic analgesics only	2	—	2		—	
Heroin/morphine + narcotic analgesics	_	_		_	_	
Marijuana only	8	—	1	2	5	
Alcohol + heroin/morphine + narcotic analgesics	_	_			_	
Amphetamine + methamphetamine	2	_	2	_	_	
All other drugs/combinations	49	16	15	13	21	
Total	62	16	20	15	27	

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Philadelphia, PA



Metro area population, 2000 5,100,931 Percent of population covered by DAWN 99%

Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru	g abuse	_	
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
Pennsylvania jurisdictions					
1. Bucks County	50	50	_	532	597,635
2. Chester County	18	11	7	452	433,501
3. Delaware County	88	72	16	1,257	550,864
4. Montgomery County	61	49	12	611	750,097
5. Philadelphia County*	528	415	113	5,666	1,517,550
New Jersey jurisdictions					
6. Burlington County	59	29	30	932	423,394
7. Camden County*	117	68	49	1,497	508,932
8. Gloucester County	21	19	2	509	254,673
9. Salem County					64,285
Total, participating (8)	942	713	229	11,456	5,036,646

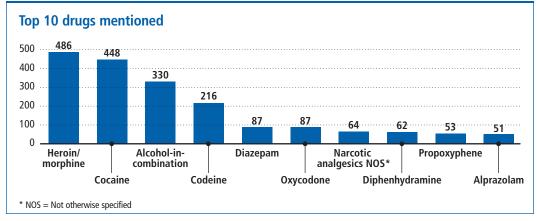
Areas that are shaded did not participate in DAWN in 2000.

Drug-related deaths by sex, age and race/ethnicity Sex Age Race/Ethnicity 679 6-17 12 White 632 Male 258 94 Black Female 18-24 249 25-34 207 60 Hispanic 35-44 335 All others 1

294

45-97

		S	ex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	35%	39%	26%	8%	29%	38%	38%	33%
Number of drugs involved	I							
Single-drug	17%	17%	18%	33%	18%	12%	15%	22%
Multi-drug	83%	83%	82%	67%	82%	88%	85%	78%
Cause of death								
Drug-induced	76%	76%	75%	75%	79%	77%	78%	72%
Drug-related	24%	24%	25%	25%	21%	23%	22%	28%
Manner of death								
Suicide	13%	12%	17%	17%	6%	14%	12%	17%
Accidental/unexpected	71%	74%	64%	75%	88%	78%	73%	60%
All others	15%	14%	19%	8%	5%	8%	15%	24%



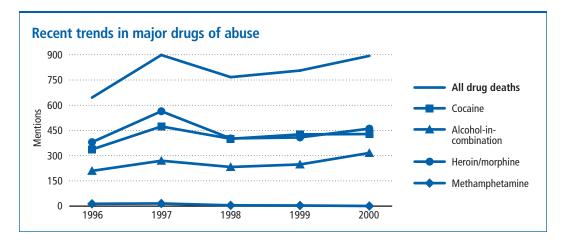
^{*} Indicates area featured in Spotlight section

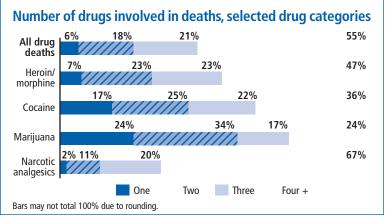
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	211	271	234	249	317	_
Cocaine	338	474	401	427	429	77
Heroin/morphine	381	564	403	409	461	31
Marijuana	35	47	47	35	39	10
Amphetamines	11	12	7	12	7	_
Methamphetamine	16	18	7	6	3	_
Club drugs ¹	1	2	_	10	7	1
Hallucinogens ²	19	33	33	29	33	6
Inhalants	1	5	1	9	2	1
Narcotic analgesics ³	227	410	310	376	503	10
Other analgesics	35	83	58	65	78	3
Benzodiazepines	128	227	210	200	212	3
Antidepressants	72	136	220	178	232	1
All other substances ³	202	295	296	332	354	10
Total drug deaths	645	897	766	805	892	153
Total drug mentions	1,677	2,577	2,227	2,337	2,677	_
Total deaths certified	10,878	10,882	10,700	10,854	10,924	_

This table includes only those counties that provided data for every year shown. Bucks County did not provide data in 1998, and is not included in this table.

				Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others
Cocaine only	78	38	7	47	24
Alcohol + cocaine	53	20	15	28	10
Heroin/morphine only	36	29	1	30	5
Alcohol + heroin/morphine	29	28	_	29	_
Cocaine + heroin/morphine	32	26	1	29	2
Alcohol + cocaine + heroin/morphine	26	25	_	24	2
Narcotic analgesics only	11	6	3	5	3
Heroin/morphine + narcotic analgesics	28	25	1	27	_
Marijuana only	10	_	1	7	2
Alcohol + heroin/morphine + narcotic analgesics	10	9	_	9	1
Amphetamine + methamphetamine	1	_			1
All other drugs/combinations	628	507	97	438	93
Total	942	713	126	673	143

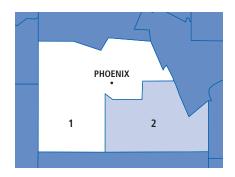
^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

Phoenix, AZ



Metro area population, 2000 3,251,876

Percent of population covered by DAWN

95%

Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru	g abuse	1 1	
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
1. Maricopa County	587	328	259	3,858	3,072,149
2. Pinal County					179,727
Total, participating (1)	587	328	259	3,858	3,072,149

Areas that are shaded did not participate in DAWN in 2000.

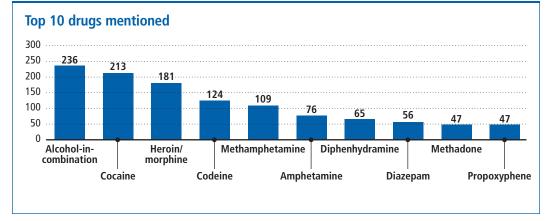
Drug-related deaths by sex, age and race/ethnicity

Sex		
Male		431
Female	 	156

Age	
6-17	6
18-24	48
25-34	126
35-44	200
45-97	207

Race/Ethnicity	
White	524
Black	33
Hispanic	14
All others	10

		S	ex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	40%	42%	35%	17%	48%	44%	42%	35%
Number of drugs involved	I							
Single-drug	11%	10%	13%	33%	17%	11%	8%	11%
Multi-drug	89%	90%	87%	67%	83%	89%	92%	89%
Cause of death								
Drug-induced	56%	53%	63%	17%	31%	63%	66%	49%
Drug-related	44%	47%	37%	83%	69%	37%	35%	51%
Manner of death								
Suicide	29%	27%	37%	67%	40%	32%	19%	34%
Accidental/unexpected	56%	58%	49%	17%	58%	61%	64%	46%
All others	15%	15%	14%	17%	2%	7%	18%	20%



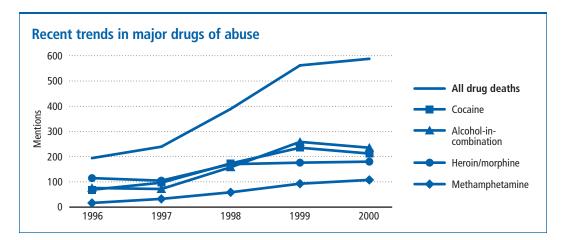
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	77	73	159	259	236	_
Cocaine	70	98	174	236	213	19
Heroin/morphine	116	106	171	177	181	3
Marijuana			_	3	8	1
Amphetamines	10	17	47	72	78	1
Methamphetamine	18	34	60	94	109	6
Club drugs ¹		1	_	6	6	1
Hallucinogens ²	1		1	1	4	3
Inhalants	3	3	2	7	1	_
Narcotic analgesics ³	47	110	200	291	318	5
Other analgesics	9	12	23	15	26	1
Benzodiazepines	17	50	90	95	104	3
Antidepressants	55	96	135	223	242	12
All other substances ³	70	192	302	484	452	7
Total drug deaths	195	240	389	561	587	62
Total drug mentions	493	792	1,364	1,963	1,978	_
Total deaths certified	3,473	3,556	3,671	3,838	3,858	<u> </u>

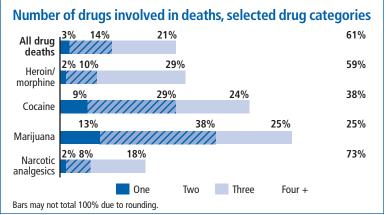
¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

Selected drug combinations by cause and manner of death

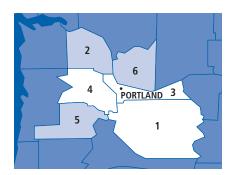
				Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others
Cocaine only	19	6	5	10	4
Alcohol + cocaine	43	14	11	27	5
Heroin/morphine only	3	3		3	
Alcohol + heroin/morphine	6	5	_	5	1
Cocaine + heroin/morphine	6	5		5	1
Alcohol + cocaine + heroin/morphine	12	12	_	12	_
Narcotic analgesics only	5	1	3	_	2
Heroin/morphine + narcotic analgesics	5	5	1	4	_
Marijuana only	1	—		1	—
Alcohol + heroin/morphine + narcotic analgesics	14	14		14	_
Amphetamine + methamphetamine	15	3	6	8	1
All other drugs/combinations	458	260	146	239	73
Total	587	328	172	328	87

* This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Portland, OR



Metro area population, 2000 1,918,009

Percent of population covered by DAWN

75%

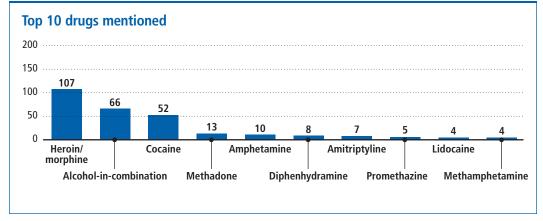
Metro area overview: Deaths and population by county, 2000

		Deaths	involving dru	g abuse		
	Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
(Oregon jurisdictions					
	1. Clackamas County	17	13	4	135	338,391
	2. Columbia County					43,560
	3. Multnomah County*	119	110	9	839	660,486
	4. Washington County	32	25	7	180	445,342
	5. Yamhill County					84,992
١	Nashington jurisdictions					
	6. Clark County					345,238
1	Total, participating (3)	168	148	20	1,154	1,444,219

Areas that are shaded did not participate in DAWN in 2000.

Drug-related deaths by sex, age and race/ethnicity Sex Age Race/Ethnicity Male 124 6-17 White 141 43 Black Female 18-24 12 11 3 25-34 33 Hispanic 35-44 64 All others 13 45-97 59

		S	ex		Age				
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97	
Alcohol involved	39%	41%	35%	_	25%	45%	38%	41%	
Number of drugs involved	I								
Single-drug	33%	34%	30%	_	58%	30%	28%	34%	
Multi-drug	67%	66%	70%	_	42%	70%	72%	66%	
Cause of death									
Drug-induced	88%	90%	84%	_	67%	94%	92%	85%	
Drug-related	12%	10%	16%		33%	6%	8%	15%	
Manner of death									
Suicide	13%	10%	21%	_	17%	12%	8%	17%	
Accidental/unexpected	73%	80%	56%	—	75%	73%	81%	64%	
All others	14%	10%	23%	<u> </u>	8%	15%	11%	19%	



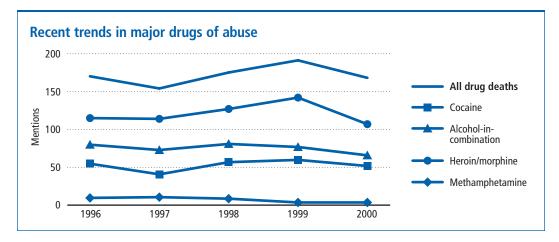
^{*} Indicates area featured in Spotlight section

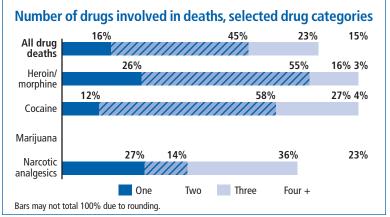
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	80	73	81	77	66	_
Cocaine	55	41	57	60	52	6
Heroin/morphine	115	114	127	142	107	28
Marijuana	1	_	_	_		_
Amphetamines	12	4	5	15	10	6
Methamphetamine	10	11	9	4	4	1
Club drugs ¹		_			1	1
Hallucinogens ²		_		1	—	_
Inhalants	3	_	1	3	_	_
Narcotic analgesics ³	16	13	16	26	22	6
Other analgesics	1	4		3	—	_
Benzodiazepines	2	6	11	9	8	_
Antidepressants	22	23	18	26	26	_
All other substances ³	11	8	17	24	39	7
Total drug deaths	170	154	175	191	168	55
Total drug mentions	328	297	342	390	335	_
Total deaths certified	1,394	1,366	1,272	1,187	1,154	

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

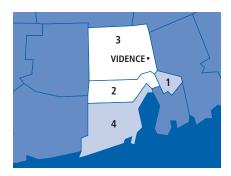
				Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others
Cocaine only	6	5	_	6	_
Alcohol + cocaine	7	2	2	3	2
Heroin/morphine only	28	28	1	25	2
Alcohol + heroin/morphine	31	31	_	31	_
Cocaine + heroin/morphine	23	23	1	20	2
Alcohol + cocaine + heroin/morphine	9	9	_	9	_
Narcotic analgesics only	6	6		4	2
Heroin/morphine + narcotic analgesics	2	2		1	1
Marijuana only	_	_	_	_	_
Alcohol + heroin/morphine + narcotic analgesics	_	_	_	_	_
Amphetamine + methamphetamine	_	_	_	_	_
All other drugs/combinations	56	42	17	24	15
Total	168	148	21	123	24

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Providence, RI



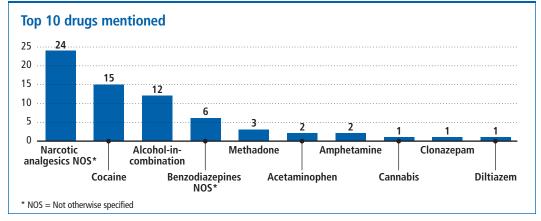
Metro area population, 2000 962,886 Percent of population covered by DAWN 82%

Metro area overview: Deaths and population by county, 2000

		Deaths	involving dru	g abuse		
-	Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
Ī	1. Bristol County					50,648
	2. Kent County	5	4	1	420	167,090
	3. Providence County	30	27	3	2,253	621,602
	4. Washington County					123,546
1	Total, participating (2)	35	31	4	2,673	788,692

Sex		Age		Race/Ethnicity	
Male	30	6-17		White	2!
Female	5	18-24	5	Black	
		25-34	5	Hispanic	
		35-44	17	All others	
		45-97	8	***************************************	

		Sex		Age				
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	34%	37%	20%	_	40%	40%	35%	25%
Number of drugs involved	ł							
Single-drug	40%	43%	20%	_	60%	20%	41%	38%
Multi-drug	60%	57%	80%	_	40%	80%	59%	63%
Cause of death								
Drug-induced	89%	87%	100%	_	100%	80%	82%	100%
Drug-related	11%	13%	_	_	_	20%	18%	_
Manner of death								
Suicide	3%	3%	_	_	_	_	_	13%
Accidental/unexpected	—		_			—		
All others	97%	97%	100%	—	100%	100%	100%	88%

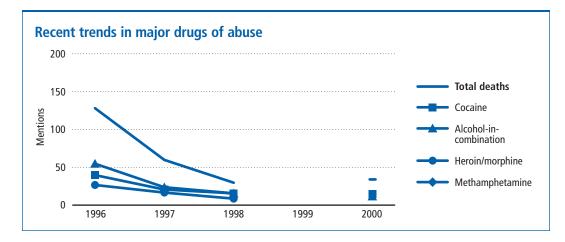


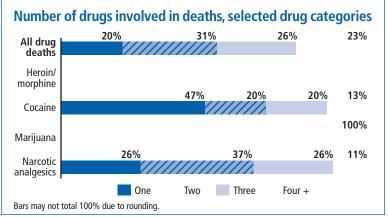
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	55	24	16	_	12	_
Cocaine	40	21	16		15	7
Heroin/morphine	27	17	9			_
Marijuana	3	3	4		1	_
Amphetamines	4		1		2	_
Methamphetamine			_			_
Club drugs ¹			_			_
Hallucinogens ²		1	_			_
Inhalants	5		_			_
Narcotic analgesics ³	40	12	13		27	7
Other analgesics	17	7	10		2	_
Benzodiazepines	48	26	8		7	_
Antidepressants	38	16	5		2	_
All other substance ³	46	29	5	_	2	_
Total drug deaths	128	60	30	_	35	14
Total drug mentions	323	156	87	-	70	_
Total deaths certified						_

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

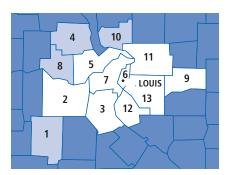
				Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others
Cocaine only	7	5	_	_	7
Alcohol + cocaine	1	1	_	_	1
Heroin/morphine only	_	_	_	_	
Alcohol + heroin/morphine	_	_	_	_	_
Cocaine + heroin/morphine	—	_		_	
Alcohol + cocaine + heroin/morphine	_	_	_	_	_
Narcotic analgesics only	7	6	—		7
Heroin/morphine + narcotic analgesics	_	_	_	_	_
Marijuana only	—	—		_	
Alcohol + heroin/morphine + narcotic analgesics	_	_	_	_	_
Amphetamine + methamphetamine	_	_	_	_	_
All other drugs/combinations	20	19	1		19
Total	35	31	1	_	3

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





St. Louis, MO



Metro area population, 2000 2,626,411

Percent of population covered by DAWN

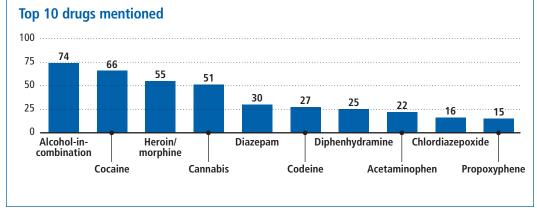
96%

Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru	g abuse		
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
Missouri jurisdictions					
1. Crawford County					22,804
2. Franklin County	8	4	4	356	93,807
3. Jefferson County	18	8	10	532	198,099
4. Lincoln County					38,944
5. St. Charles County	13	8	5	766	283,883
6. St. Louis City*	74	9	65	2,460	348,189
7. St. Louis County*	116	35	81	4,427	1,016,315
8. Warren County					24,525
Illinois jurisdictions					
9. Clinton County	_	_	_	87	35,535
10. Jersey County					21,668
11. Madison County	10	6	4	387	258,941
12. Monroe County	_	_	_	15	27,619
13. St. Clair County	5	_	5	1,296	256,082
Total, participating (9)	244	70	174	10,326	2,518,470

Drug-related	deaths by sex	, age and race/et	thnicity		
Sex		Age		Race/Ethnicity	
Male	171	6-17	8	White	182
Female	73	18-24	26	Black	60
		25-34	45	Hispanic	
		35-44	99	All others	2
		45-97	66	•••••	

		S	ex		Age			
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	30%	35%	19%	13%	31%	24%	36%	27%
Number of drugs involved	ł							
Single-drug	27%	27%	25%	50%	27%	22%	23%	32%
Multi-drug	73%	73%	75%	50%	73%	78%	77%	68%
Cause of death								
Drug-induced	29%	27%	32%	13%	42%	33%	27%	24%
Drug-related	71%	73%	68%	88%	58%	67%	73%	76%
Manner of death								
Suicide	23%	23%	23%	25%	27%	24%	21%	23%
Accidental/unexpected	51%	54%	45%	50%	69%	58%	48%	44%
All others	26%	23%	32%	25%	4%	18%	30%	33%



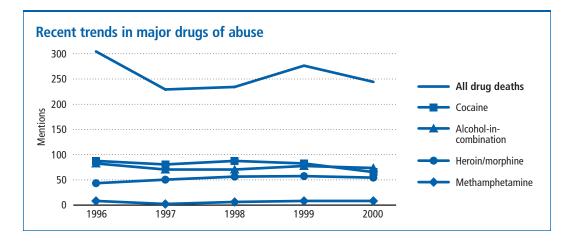
^{*} Indicates area featured in Spotlight section

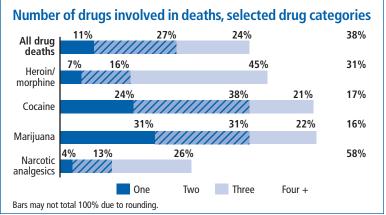
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	83	71	71	78	74	_
Cocaine	88	81	88	83	66	16
Heroin/morphine	44	51	57	58	55	4
Marijuana	94	49	47	62	51	16
Amphetamines	8	1	3	7	7	_
Methamphetamine	9	3	7	9	9	_
Club drugs ¹				3	2	_
Hallucinogens ²	4	_	1	2	3	1
Inhalants	2	3	3	5	5	_
Narcotic analgesics ³	78	58	55	76	80	3
Other analgesics	52	29	38	33	30	1
Benzodiazepines	72	64	62	71	66	2
Antidepressants	49	43	50	41	52	2
All other substances ³	75	44	46	84	103	20
Total drug deaths	304	229	234	276	244	65
Total drug mentions	658	497	528	612	603	_
Total deaths certified	10,009	10,057	10,039	10,380	10,326	

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

				Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others
Cocaine only	16	3	1	12	3
Alcohol + cocaine	14	1	3	9	2
Heroin/morphine only	4	2	_	2	2
Alcohol + heroin/morphine	_	_	_	_	_
Cocaine + heroin/morphine	2	1		2	
Alcohol + cocaine + heroin/morphine	2	_	1	1	_
Narcotic analgesics only	3	2	1	2	_
Heroin/morphine + narcotic analgesics	7	5	_	6	1
Marijuana only	16	_	7	2	7
Alcohol + heroin/morphine + narcotic analgesics	3	2	_	3	_
Amphetamine + methamphetamine	3	_	<u>—</u>	3	_
All other drugs/combinations	174	54	43	83	48
Total	244	70	56	125	63

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Salt Lake City, UT



Metro area population, 2000 1,333,914 Percent of population covered

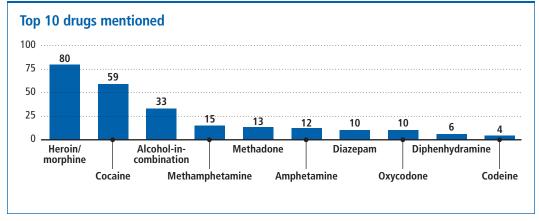
by DAWN 85%

Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru	g abuse		
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
1. Davis County	12	9	3	117	238,994
2. Salt Lake County*	117	109	8	688	898,387
3. Weber County					196,533
Total, participating (2)	129	118	11	805	1,137,381

-	icutiis by scx	, age and race/et	innerty		
Sex		Age		Race/Ethnicity	
Male	95	6-17	_	White	101
Female	31	18-24	10	Black	
		25-34	37	Hispanic	1
		35-44	48	All others	
		45-97	34		

		S	ex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	26%	29%	13%	_	10%	14%	27%	41%
Number of drugs involved	ł							
Single-drug	26%	26%	23%	_	40%	38%	17%	24%
Multi-drug	74%	74%	77%		60%	62%	83%	76%
Cause of death								
Drug-induced	91%	93%	90%	_	80%	95%	94%	88%
Drug-related	9%	7%	10%		20%	5%	6%	12%
Manner of death								
Suicide	16%	11%	29%	_	30%	16%	13%	15%
Accidental/unexpected	3%	2%	6%		—	—	4%	6%
All others	81%	87%	65%	····	70%	84%	83%	79%



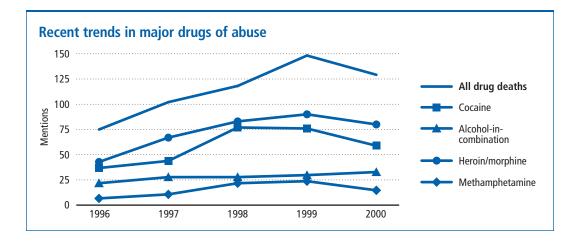
^{*} Indicates area featured in Spotlight section

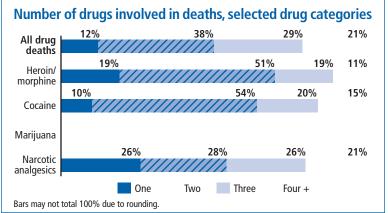
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	22	28	28	30	33	_
Cocaine	37	44	77	76	59	6
Heroin/morphine	43	67	83	90	80	15
Marijuana	2	2	1	1	—	_
Amphetamines	6	8	15	24	12	_
Methamphetamine	7	11	22	24	15	1
Club drugs ¹	—	—	—	1	2	1
Hallucinogens ²	—				1	_
Inhalants	1	1	·····	1	·····	——————————————————————————————————————
Narcotic analgesics ³	21	18	15	28	39	10
Other analgesics	1	1	2	2	3	_
Benzodiazepines	5	6	5	8	14	—
Antidepressants	7	17	4	9	8	_
All other substances ³	13	12	9	9	15	1
Total drug deaths	75	102	118	148	129	34
Total drug mentions	165	215	261	303	281	<u> </u>
Total deaths certified	842	823	802	820	805	_

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

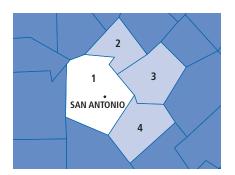
				Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others
Cocaine only	6	4	2	_	4
Alcohol + cocaine	2	2	_	_	2
Heroin/morphine only	15	14	_	_	15
Alcohol + heroin/morphine	8	8	_	_	8
Cocaine + heroin/morphine	29	29	1	_	28
Alcohol + cocaine + heroin/morphine	8	8	_	_	8
Narcotic analgesics only	10	6	3	_	7
Heroin/morphine + narcotic analgesics	3	3	1	_	2
Marijuana only	_	_	_	_	_
Alcohol + heroin/morphine + narcotic analgesics	_	_	_	_	_
Amphetamine + methamphetamine	2	_		2	_
All other drugs/combinations	46	44	13	2	31
Total	129	118	20	4	105

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





San Antonio, TX



Metro area population, 2000 1,592,383

Percent of population covered by DAWN

87%

Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru	g abuse		
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
1. Bexar County	242	160	82	2,233	1,392,931
2. Comal County					78,021
3. Guadalupe County					89,023
4. Wilson County					32,408
Total, participating (1)	242	160	82	2,233	1,392,931

Areas that are shaded did not participate in DAWN in 2000.

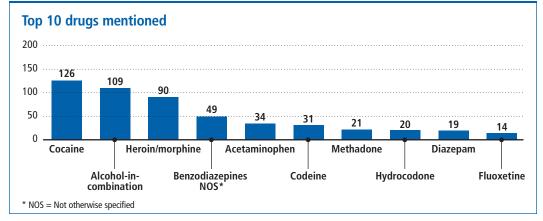
Drug-related deaths by sex, age and race/ethnicity

Sex	
Male	166
Female	 76

Age	
6-17	5
18-24	27
25-34	56
35-44	90
45-97	64

Race/Ethnicity	
White	10
Black	1
Hispanic	12
All others	

		S	ex	Age				
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	45%	49%	36%	40%	19%	57%	51%	38%
Number of drugs involved	ŀ							
Single-drug	11%	11%	11%	_	22%	11%	8%	13%
Multi-drug	89%	89%	89%	100%	78%	89%	92%	88%
Cause of death								
Drug-induced	66%	64%	70%	80%	70%	64%	72%	56%
Drug-related	34%	36%	30%	20%	30%	36%	28%	44%
Manner of death								
Suicide	22%	20%	26%	20%	33%	21%	22%	17%
Accidental/unexpected	67%	70%	59%	80%	67%	70%	71%	58%
All others	11%	10%	14%	—	_	9%	7%	25%

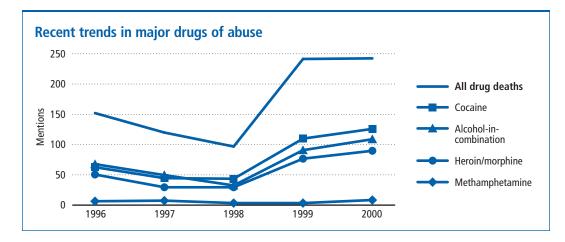


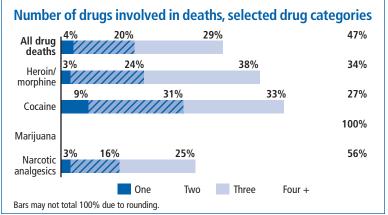
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	68	50	33	91	109	_
Cocaine	63	45	44	110	126	11
Heroin/morphine	51	30	30	77	90	3
Marijuana	12	11	2	7	2	_
Amphetamines	6	4	2	5	4	_
Methamphetamine	7	8	4	4	9	1
Club drugs ³					—	_
Hallucinogens ²					—	_
Inhalants	2	1		1	—	_
Narcotic analgesics ³	70	48	38	90	95	3
Other analgesics	9	4	5	30	39	4
Benzodiazepines	36	15	22	48	77	_
Antidepressants	43	21	35	92	65	1
All other substances ³	48	32	32	104	100	4
Total drug deaths	152	120	97	241	242	27
Total drug mentions	415	269	247	659	716	_
Total deaths certified	2,006	2,019	1,895	2,032	2,233	_

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

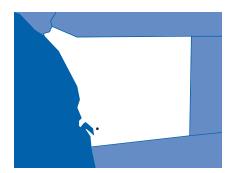
				Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others
Cocaine only	11	3	1	7	3
Alcohol + cocaine	22	7	5	17	_
Heroin/morphine only	3	3	_	3	_
Alcohol + heroin/morphine	10	10	_	10	_
Cocaine + heroin/morphine	6	5	1	5	_
Alcohol + cocaine + heroin/morphine	11	11	_	10	1
Narcotic analgesics only	3	2	_	3	_
Heroin/morphine + narcotic analgesics	5	3	2	3	_
Marijuana only	_	_	_	_	—
Alcohol + heroin/morphine + narcotic analgesics	5	5	_	5	_
Amphetamine + methamphetamine	_	_	_	_	_
All other drugs/combinations	166	111	44	99	23
Total	242	160	53	162	27

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





San Diego, CA



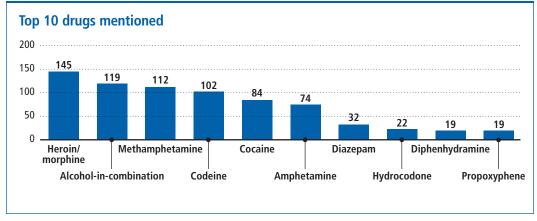
Metro area population, 2000 2,813,833 Percent of population covered by DAWN 100%

Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru			
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
1. San Diego County	360	229	131	2,436	2,813,833
Total, participating (1)	360	229	131	2,436	2,813,833

Sex		Age		Race/Ethnicity	
Male	257	6-17	3	White	267
Female	Female 103	18-24	18	Black	22
		25-34	62	Hispanic	56
		35-44	143	All others	1!
		45-97	134	***************************************	

		S	ex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	33%	38%	21%	_	28%	29%	34%	35%
Number of drugs involved	ł							
Single-drug	17%	16%	18%	100%	11%	11%	17%	18%
Multi-drug	83%	84%	82%	_	89%	89%	83%	82%
Cause of death								
Drug-induced	64%	62%	67%	_	56%	60%	66%	66%
Drug-related	36%	38%	33%	100%	44%	40%	34%	34%
Manner of death								
Suicide	24%	21%	29%	67%	17%	27%	19%	27%
Accidental/unexpected	63%	68%	52%	33%	67%	66%	74%	51%
All others	13%	11%	18%	·····	17%	6%	7%	22%

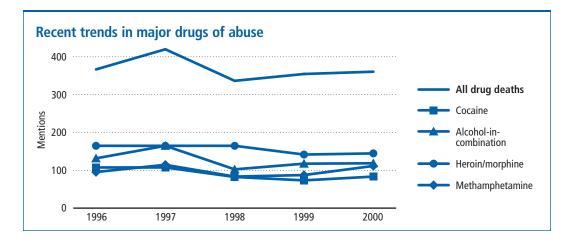


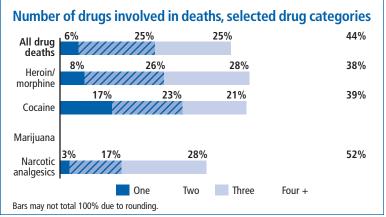
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	132	165	103	118	119	_
Cocaine	108	108	83	74	84	14
Heroin/morphine	165	165	165	142	145	12
Marijuana		2	_	1	—	_
Amphetamines	75	87	66	73	74	_
Methamphetamine	96	115	84	88	112	11
Club drugs ¹	2		2	5	3	2
Hallucinogens ²	2	1	1		—	
Inhalants	1	3	_	_	_	_
Narcotic analgesics ³	188	191	145	137	179	5
Other analgesics	28	28	19	25	22	3
Benzodiazepines	56	33	46	59	58	1
Antidepressants	82	52	70	109	67	4
All other substances ³	92	143	82	106	124	8
Total drug deaths	366	419	336	354	360	60
Total drug mentions	1,026	1,094	866	938	987	_
Total deaths certified	2,566	2,345	1,640	2,271	2,436	_

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

				Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All other
Cocaine only	14	5	_	11	3
Alcohol + cocaine	12	1	2	9	1
Heroin/morphine only	12	7	4	7	1
Alcohol + heroin/morphine	7	6	_	7	
Cocaine + heroin/morphine	5	3	—	4	1
Alcohol + cocaine + heroin/morphine	2	1	1	1	_
Narcotic analgesics only	5	3	1	3	1
Heroin/morphine + narcotic analgesics	21	21	3	17	1
Marijuana only		—		_	
Alcohol + heroin/morphine + narcotic analgesics	17	16	1	15	1
Amphetamine + methamphetamine	38	6	8	26	4
All other drugs/combinations	227	160	65	128	34
Total	360	229	85	228	47

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





San Francisco, CA



Metro area population, 2000 1,731,183 Percent of population covered by DAWN 100%

Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru			
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
1. Marin County	26	15	11	263	247,289
2. San Francisco County*	217	141	76	1,375	776,733
3. San Mateo County	43	33	10	2,101	707,161
Total, participating (3)	286	189	97	3,739	1,731,183

^{*} Indicates area featured in Spotlight section

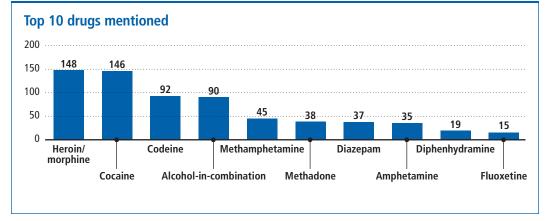
Drug-related deaths by sex, age and race/ethnicity

Sex	
Male	235
Female	 49

Age	
6-17	_
18-24	 14
25-34	 48
35-44	91
45-97	133

Race/Ethnicity	
White	19
Black	5.
Hispanic	2
All others	1

		Sex				Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	31%	34%	18%	_	29%	42%	27%	31%
Number of drugs involved	ł							
Single-drug	16%	16%	16%	_	_	10%	13%	21%
Multi-drug	84%	84%	84%	_	100%	90%	87%	79%
Cause of death								
Drug-induced	66%	67%	65%	_	79%	63%	68%	65%
Drug-related	34%	33%	35%	_	21%	38%	32%	35%
Manner of death								
Suicide	13%	12%	12%	_	7%	13%	7%	17%
Accidental/unexpected	65%	66%	57%		86%	60%	70%	60%
All others	23%	21%	31%	—	7%	27%	23%	23%

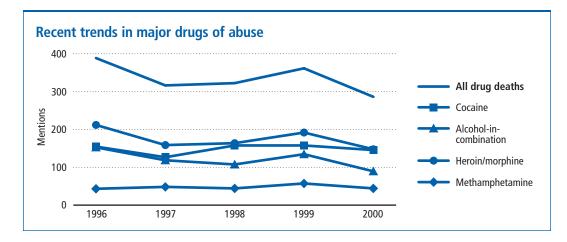


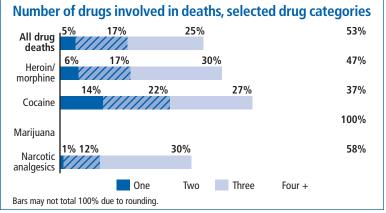
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	153	119	108	135	90	_
Cocaine	155	127	158	158	146	21
Heroin/morphine	212	159	164	192	148	9
Marijuana	5	2	5	5	1	_
Amphetamines	7	2	31	38	35	2
Methamphetamine	44	49	45	58	45	5
Club drugs ¹		4	2	6	6	_
Hallucinogens ²	3	1	1	3	1	_
Inhalants	3	2		1	1	_
Narcotic analgesics ³	175	156	185	198	164	1
Other analgesics	23	21	19	21	16	1
Benzodiazepines	66	71	62	50	55	_
Antidepressants	90	49	56	88	70	1
All other substances ³	128	134	112	133	95	5
Total drug deaths	388	316	322	361	286	45
Total drug mentions	1,064	896	948	1,086	873	
Total deaths certified	4,281	4,142	4,119	3,964	3,739	

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

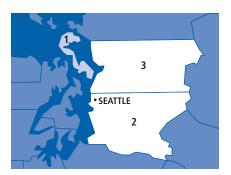
				Manner		
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others	
Cocaine only	21	2	1	4	16	
Alcohol + cocaine	6	2	2	4	_	
Heroin/morphine only	9	5	_	7	2	
Alcohol + heroin/morphine	4	3		4		
Cocaine + heroin/morphine	13	10		12	1	
Alcohol + cocaine + heroin/morphine	9	9	_	9	_	
Narcotic analgesics only	1	_		_	1	
Heroin/morphine + narcotic analgesics	7	5	1	6	_	
Marijuana only		—		_		
Alcohol + heroin/morphine + narcotic analgesics	7	7	_	7	_	
Amphetamine + methamphetamine	11	3	3	5	3	
All other drugs/combinations	198	143	29	127	42	
Total	286	189	36	185	65	

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Seattle, WA



Metro area population, 2000 2,414,616 Percent of population covered by DAWN 97%

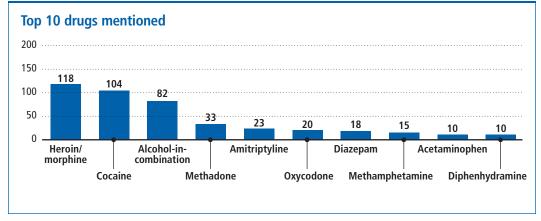
Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru			
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
1. Island County					71,558
2. King County*	215	215	_	1,316	1,737,034
3. Snohomish County	49	49	_	542	606,024
Total, participating (2)	264	264	_	1,858	2,343,058

Areas that are shaded did not participate in DAWN in 2000.

Drug-related deaths by sex, age and race/ethnicity Sex Age Race/Ethnicity Male 191 6-17 White 217 73 18 Black 23 Female 18-24 25-34 47 11 Hispanic 35-44 97 13 All others 45-97 101

		S	ex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	31%	37%	16%	_	33%	26%	34%	31%
Number of drugs involved	ŀ							
Single-drug	31%	32%	26%	100%	56%	30%	25%	32%
Multi-drug	69%	68%	74%		44%	70%	75%	68%
Cause of death								
Drug-induced	100%	100%	100%	100%	100%	100%	100%	100%
Drug-related	_	_	_		_	_	_	_
Manner of death								
Suicide	14%	10%	23%	_	11%	11%	7%	22%
Accidental/unexpected	77%	82%	62%	100%	78%	79%	82%	69%
All others	10%	8%	15%	—	11%	11%	10%	9%



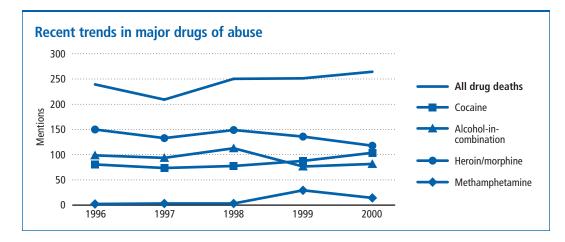
^{*} Indicates area featured in Spotlight section

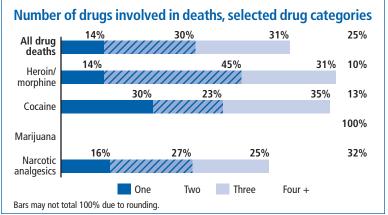
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	99	94	113	77	82	_
Cocaine	81	74	78	88	104	31
Heroin/morphine	150	133	149	136	118	16
Marijuana			1		1	_
Amphetamines	1	2	_	2	1	_
Methamphetamine	3	4	4	30	15	4
Club drugs ¹			_	2	3	1
Hallucinogens ²			_		—	_
Inhalants	_	_	_	_	1	_
Narcotic analgesics ³	36	40	66	43	75	12
Other analgesics	21	23	14	18	26	6
Benzodiazepines	27	27	41	26	33	2
Antidepressants	48	48	80	74	83	5
All other substances ³	32	39	61	65	51	4
Total drug deaths	239	209	250	251	264	81
Total drug mentions	498	484	607	561	593	_
Total deaths certified	2,514	1,782	1,809	1,785	1,858	<u> </u>

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

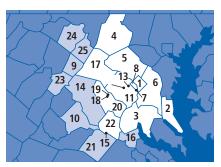
				Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others
Cocaine only	31	31	1	29	1
Alcohol + cocaine	1	1	_	1	_
Heroin/morphine only	16	16	2	14	_
Alcohol + heroin/morphine	23	23	1	22	_
Cocaine + heroin/morphine	19	19	—	18	1
Alcohol + cocaine + heroin/morphine	20	20	_	20	_
Narcotic analgesics only	12	12	_	11	1
Heroin/morphine + narcotic analgesics	3	3		2	1
Marijuana only	—	—			
Alcohol + heroin/morphine + narcotic analgesics	1	1	_	1	_
Amphetamine + methamphetamine	_	_	_	_	_
All other drugs/combinations	138	138	32	84	22
Total	264	264	36	202	26

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Washington, DC



Metro area population, 2000 4,923,153

Percent of population covered by DAWN

92%

Metro area overview: Deaths and population by county, 2000

_	Deaths	involving dru	g abuse		
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
Washington, DC jurisdictions	S				
 District of Columbia* 	100	73	27	1,751	572,059
Maryland jurisdictions					
2. Calvert County	5	3	2	78	74,563
3. Charles County	7	4	3	65	120,546
4. Frederick County	4	4	_	118	195,277
Montgomery County*	34	30	4	434	873,341
6. Prince George's County*	54	34	20	890	801,515
Virginia jurisdictions					
7. Alexandria City	1	1	_	80	128,283
8. Arlington County	3	3	_	125	189,453
9. Clarke County					12,652
10. Culpeper County					34,262
11. Fairfax City					21,498
12. Fairfax County	16	16	_	440	969,749
13. Falls Church City	_	_	_	_	10,377
14. Fauquier County					55,139
15. Fredericksburg City					19,279
16. King George County					16,803
17. Loudoun County	4	4	_	74	169,599
18. Manassas City	2	2	_	50	35,135
19. Manassas Park City					10,290
20. Prince William County	4	4	_	102	280,813
21. Spotsylvania County					90,395
22. Stafford County	1	1	_	28	92,446
23. Warren County					31,584
West Virginia jurisdictions					
24. Berkeley County					75,905
25. Jefferson County					42,190
Total, participating (14)	235	179	56	4,235	4,513,156

Areas that are shaded did not participate in DAWN in 2000.

* Indicates area featured in Spotlight section

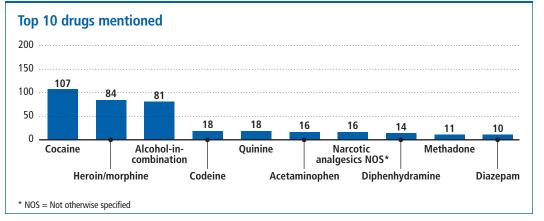
Drug-related deaths by sex, age and race/ethnicity

Sex	
Male	160
Female	73

Age	
6-17	2
18-24	13
25-34	41
35-44	88
45-97	91

Race/Ethnicity	
White	98
Black	12:
Hispanic	
All others	(

		S	ex	Age					
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97	
Alcohol involved	34%	42%	18%	_	31%	39%	41%	27%	
Number of drugs involved	I								
Single-drug	34%	28%	48%	100%	46%	29%	27%	40%	
Multi-drug	66%	72%	52%	_	54%	71%	73%	60%	
Cause of death									
Drug-induced	76%	76%	77%	50%	54%	76%	82%	75%	
Drug-related	24%	24%	23%	50%	46%	24%	18%	25%	
Manner of death									
Suicide	14%	12%	19%	100%	31%	15%	8%	15%	
Accidental/unexpected	47%	51%	37%	_	46%	44%	47%	51%	
All others	39%	37%	44%	_	23%	41%	45%	34%	

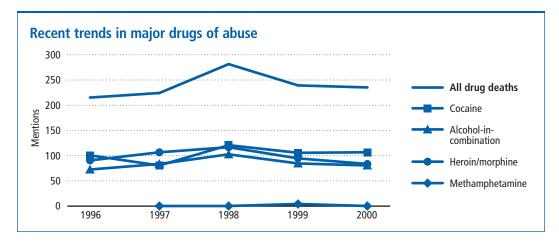


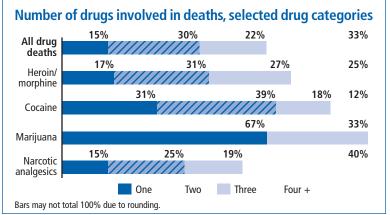
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	73	84	103	85	81	_
Cocaine	101	81	121	106	107	33
Heroin/morphine	91	107	117	95	84	14
Marijuana		1	_	_	3	2
Amphetamines	_	1	_	_	1	1
Methamphetamine		1	1	5	1	_
Club drugs ¹	1		_		1	_
Hallucinogens ²	9	5	4	4	9	4
Inhalants	_	1	_	_	_	_
Narcotic analgesics ³	38	47	62	55	72	11
Other analgesics	16	23	25	24	22	2
Benzodiazepines	14	32	23	19	22	4
Antidepressants	49	48	50	57	47	2
All other substances ³	102	107	117	101	75	7
Total drug deaths	215	224	281	239	235	80
Total drug mentions	494	538	623	551	525	_
Total deaths certified	4,275	4,286	4,631	4,713	4,235	— —

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

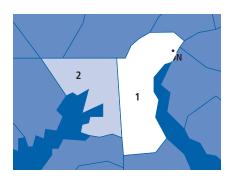
				Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others
Cocaine only	33	20	2	21	10
Alcohol + cocaine	19	9	2	12	5
Heroin/morphine only	14	12	_	11	3
Alcohol + heroin/morphine	12	12	_	8	4
Cocaine + heroin/morphine	10	9	_	7	3
Alcohol + cocaine + heroin/morphine	9	8	_	6	3
Narcotic analgesics only	11	8	2	5	4
Heroin/morphine + narcotic analgesics	1	1	_	_	1
Marijuana only	2	2	2	_	_
Alcohol + heroin/morphine + narcotic analgesics	3	3		1	2
Amphetamine + methamphetamine	_	_	_	_	_
All other drugs/combinations	121	95	25	40	56
Total	235	179	33	111	91

^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses). See Glossary.





Wilmington, DE



Metro area population, 2000 586,216 Percent of population covered by DAWN 85%

Metro area overview: Deaths and population by county, 2000

	Deaths	involving dru	g abuse		
Metro area component	TOTAL	Drug- induced	Drug- related	Total deaths certified	Total population (2000)
Delaware jurisdiction 1. New Castle County Maryland jurisdiction	54	21	33	735	500,265
2. Cecil County					85,951
Total, participating (1)	54	21	33	735	500,265

Areas that are shaded did not participate in DAWN in 2000.

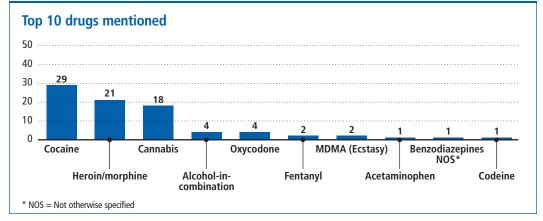
Drug-related deaths by sex, age and race/ethnicity

Sex	
Male	38
Female	13
• • • • • • • • • • • • • • • • • • • •	

Age		
6-17	2	
18-24	5)
25-34	13	3
35-44	20)
45-97	14	į

Race/Ethnicity	
White	40
Black	{
Hispanic	
All others	

		S	ex	Age				
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	7%	8%	8%	_	_	8%	10%	7%
Number of drugs involved	I							
Single-drug	54%	55%	38%	50%	80%	62%	30%	71%
Multi-drug	46%	45%	62%	50%	20%	38%	70%	29%
Cause of death								
Drug-induced	39%	32%	62%	_	40%	54%	40%	29%
Drug-related	61%	68%	38%	100%	60%	46%	60%	71%
Manner of death								
Suicide	4%	5%	_	_	_	15%	_	_
Accidental/unexpected	35%	42%	23%	100%	60%	38%	25%	29%
All others	61%	53%	77%	—	40%	46%	75%	71%

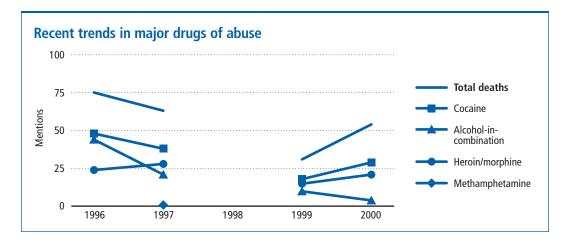


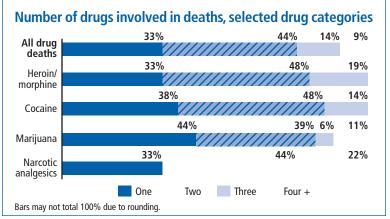
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	44	21	_	10	4	_
Cocaine	48	38	_	18	29	11
Heroin/morphine	24	28	_	15	21	7
Marijuana		_	_	2	18	8
Amphetamines	1	1	_	_	1	_
Methamphetamine		1	_			_
Club drugs ¹		_	_	1	2	_
Hallucinogens ²	3	2	_	_		_
Inhalants	2	_	_	_		_
Narcotic analgesic ³	5	9	_	4	9	3
Other analgesics	3	4	_	_	1	_
Benzodiazepines	9	4	_	1	1	_
Antidepressants	3	3	_		1	_
All other substances ³	6	4	_			_
Total drug deaths	75	63	_	31	54	29
Total drug mentions	148	115	_	51	87	_
Total deaths certified		-	_			_

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

				Manner	
Combination	TOTAL	Drug- induced*	Suicide	Accidental/ Unexpected	All others
Cocaine only	11	2	_	3	8
Alcohol + cocaine	1	_	_	_	1
Heroin/morphine only	7	6	_	2	5
Alcohol + heroin/morphine		—	—	_	_
Cocaine + heroin/morphine	8	6	<u> </u>	4	4
Alcohol + cocaine + heroin/morphine	2	1	_	1	1
Narcotic analgesics only	3	2	—	1	2
Heroin/morphine + narcotic analgesics	_	_		_	_
Marijuana only	8	—	1	3	4
Alcohol + heroin/morphine + narcotic analgesics	_	_	_	_	_
Amphetamine + methamphetamine	_	_	_	_	_
All other drugs/combinations	14	4	1	5	8
Total	54	21	2	19	33

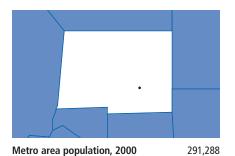
^{*} This column shows the number of deaths directly caused by the listed substances (i.e., overdoses).





ABBREVIATED PROFILES FOR AREAS WITH FEW CASES

Boulder, CO

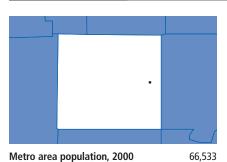


Percent of population covered by DAWN 100%

Metro area overview: Deaths and population by county, 2000

Deaths involving drug abuse					
Metro area component	TOTAL	Drug-induced	Drug-related	Total deaths certified	Total population (2000)
1. Boulder County	15	14	1	1,353	291,288
Total, participating (1)	15	14	1	1,353	291,288

Casper, WY

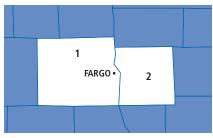


Percent of population covered by DAWN 100%

Metro area overview: Deaths and population by county, 2000 Deaths involving drug abuse

	De	aths involving dru	ig abuse		
Metro area component	TOTAL	Drug-induced	Drug-related	Total deaths certified	Total population (2000)
1. Natrona County	7	1	6	114	66,533
Total, participating (1)	7	1	6	114	66,533

Fargo, ND

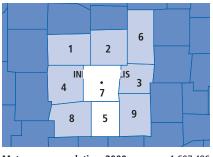


Metro area population, 2000 174,367
Percent of population covered by DAWN 100%

Metro area overview: Deaths and population by county, 2000

Deaths involving drug abuse					
Metro area component	TOTAL	Drug-induced	Drug-related	Total deaths certified	Total population (2000)
North Dakota jurisdiction					
1. Cass County	1	1	_	102	123,138
Minnesota jurisdiction					
2. Clay County	_	_	_	219	51,229
Total, participating (2)	1	1	_	321	174,367

Indianapolis, IN



Metro area population, 2000 1,607,486 Percent of population covered by DAWN 61%

Metro area overview: Deaths and population by county, 2000

Deaths involving drug abuse					
Metro area component	TOTAL	Drug-induced	Drug-related	Total deaths certified	Total population (2000)
1. Boone County					46,107
2. Hamilton County					182,740
3. Hancock County					55,391
4. Hendricks County					104,093
5. Johnson County	2	2	_	60	115,209
6. Madison County					133,358
7. Marion County	9	9	_	1,148	860,454
8. Morgan County					66,689
9. Shelby County					43,445
Total, participating (2)	11	11	_	1,208	975,663

Manchester-Nashua, NH

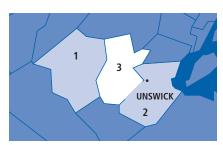


Percent of population covered by DAWN 100%

Metro area overview: Deaths and population by county, 2000

Deaths involving drug abuse					
Metro area component	TOTAL	Drug-induced	Drug-related	Total deaths certified	Total population (2000)
1. Hillsborough County	13	11	2	361	380,841
Total, participating (1)	13	11	2	361	380,841

Middlesex-Somerset, NJ

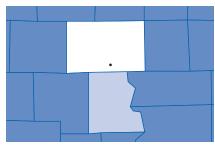


Metro area population, 2000 1,169,641 Percent of population covered by DAWN 25%

Metro area overview: Deaths and population by county, 2000

	Deaths involving drug abuse				
Metro area component	TOTAL	Drug-induced	Drug-related	Total deaths certified	Total population (2000)
1. Hunterdon County					121,989
2. Middlesex County					750,162
3. Somerset County	14	7	7	418	297,490
Total, participating (1)	14	7	7	418	297,490

Sioux Falls, SD



Metro area population, 2000 172,412 Percent of population covered by DAWN 86%

Metro area overview: Deaths and population by county, 2000

	Deaths involving drug abuse				
Metro area component	TOTAL	Drug-induced	Drug-related	Total deaths certified	Total population (2000)
1. Lincoln County					24,131
2. Minnehaha County	1	1	_	409	148,281
Total, participating (1)	1	1	_	409	148,281

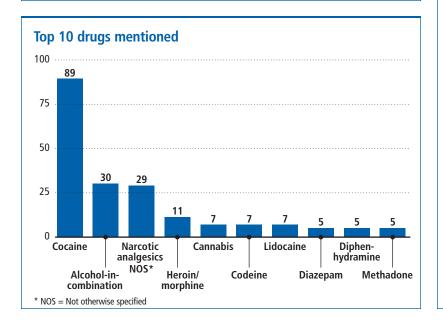
AREA SPOTLIGHTS

Atlanta: Fulton County, GA



on, 2000
114
54
60
1,345
816,006

Sex		Age		Race/Ethnicity	
Male	85	6-17	2	White	44
Female	29	18-24	13	Black	68
		25-34	23	Hispanic	
		35-44	31	All others	-
		45-97	45		



Drug involvement in death by sex and age of decedent

			Sex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	26%	27%	24%	_	8%	30%	26%	31%
Number of drugs involved	d							
Single-drug	38%	42%	24%	_	46%	22%	45%	40%
Multi-drug	62%	58%	76%	100%	54%	78%	55%	60%
Cause of death								
Drug-induced	47%	42%	62%	50%	69%	61%	45%	36%
Drug-related	53%	58%	38%	50%	31%	39%	55%	64%
Manner of death								
Suicide	16%	13%	24%	50%	31%	17%	16%	9%
Accidental/unexpected	61%	61%	62%	50%	69%	74%	71%	47%
All others	23%	26%	14%		—	9%	13%	44%

Drug mentions by drug category

Duver cotonomi	1006	1007	1000	1000	2000	Single-drug deaths, 2000
Drug category	1996	1997	1998	1999	2000	2000
Alcohol-in-combination	41	18	49	33	30	
Cocaine	76	41	103	121	89	37
Heroin/morphine	14	19	26	25	11	_
Marijuana	9	4	8	8	7	1
Amphetamines	_	_	_	3	2	_
Methamphetamine	_	_	_	1	1	_
Club drugs ¹	1	1	_	2	_	_
Hallucinogens ²	—	_	1	_	_	_
Inhalants	_	_	_	4	1	_
Narcotic analgesics ³	11	11	16	23	51	2
Other analgesics	3	1	5	2	2	_
Benzodiazepines	5	3	9	13	12	_
Antidepressants	8	8	10	7	7	1
All other substances ³	21	17	20	20	24	2
Total drug deaths	98	58	125	158	114	43
Total drug mentions	189	123	247	262	237	_
Total deaths certified	1,497	1,377	1,496	1,397	1,345	_

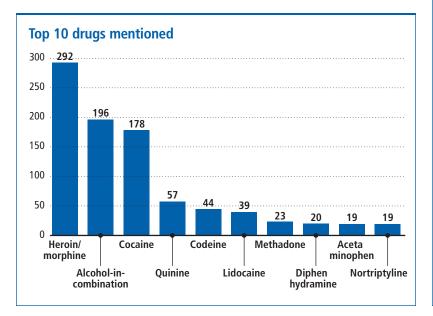
¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

Baltimore: Baltimore City, MD



Baltimore City, MD: Deaths and population, 2000 Deaths involving drug abuse Total 360 Drug-induced 306 Drug-related 54 Total deaths certified 3,507 Population (2000) 651,154

ex		Age		Race/Ethnicity	
Male	280	6-17	3	White	14
Female	80	18-24	7	Black	21
		25-34	59	Hispanic	_
		35-44	177	All others	
		45-97	114	•••••	



	TOTAL	9	Sex			Age		
		Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	54%	56%	49%	_	43%	53%	58%	53%
Number of drugs involve	d							
Single-drug	10%	9%	13%	_	14%	8%	8%	13%
Multi-drug	90%	91%	88%	100%	86%	92%	92%	87%
Cause of death								
Drug-induced	85%	85%	85%	100%	71%	85%	88%	82%
Drug-related	15%	15%	15%	_	29%	15%	12%	18%
Manner of death								
Suicide	4%	2%	13%	33%	14%	2%	2%	8%
Accidental/unexpected	1%	1%	3%		·····	3%	2%	

85%

67%

86%

95%

97%

92%

94%

All others

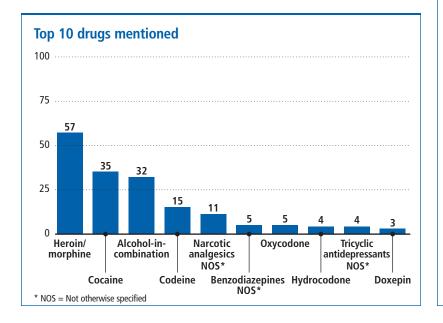
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	128	186	181	174	196	_
Cocaine	208	228	241	232	178	12
Heroin/morphine	246	278	310	344	292	21
Marijuana	_	_	_	_	_	_
Amphetamines	1	_	_	_	_	_
Methamphetamine	_	_	_	13	_	_
Club drugs ¹	3	_	2	2	1	_
Hallucinogens ²	3	_	_	_	1	_
Inhalants	_	_	_	2	_	_
Narcotic analgesics ³	86	100	118	71	86	1
Other analgesics	19	28	22	29	25	1
Benzodiazepines	19	18	25	6	16	1
Antidepressants	47	66	80	85	73	_
All other substances ³	316	353	393	305	226	_
Total drug deaths	318	357	379	404	360	36
Total drug mentions	1,076	1,257	1,372	1,263	1,094	_
Total deaths certified	3,588	3,464	3,488	3,687	3,507	

Boston: Middlesex County, MA



Deaths involving drug abuse	.
Total	104
Drug-induced	94
Drug-related	10

ex	1	Age	1	Race/Ethnicity	
Male	77	6-17	_	White	89
Female	27	18-24	8	Black	2
		25-34	21	Hispanic	
		35-44	48	All others	(
		45-97	27	•••••	



Drug involvement in death by sex and age of decedent Sex Age TOTAL Male **Female** 6-17 18-24 25-34 35-44 45-97 Alcohol involved 31% 34% 22% 13% 29% 33% 33% Number of drugs involved Single-drug 33% 34% 30% 50% 24% 25% 48% 67% Multi-drug 66% 70% 50% 76% 75% 52% Cause of death Drug-induced 90% 88% 96% 88% 95% 88% 93% Drug-related 10% 12% 4% 13% 5% 13% 7% Manner of death Suicide 13% 6% 13% 6% 33% 33% 5% 4% Accidental/unexpected 3% 13%

67%

90%

84%

All others

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	31	28	45	31	32	_
Cocaine	40	28	40	32	35	6
Heroin/morphine	50	47	62	46	57	15
Marijuana	—	_	1		1	_
Amphetamines	_	1	_	_	_	_
Methamphetamine	_	1	_	4	_	_
Club drugs ¹	_	_	_	_	1	1
Hallucinogens ²	_	_	_	_	1	1
Inhalants	1	1	1	2	_	_
Narcotic analgesics ³	44	24	43	24	38	6
Other analgesics	8	10	11	5	2	_
Benzodiazepines	6	7	22	4	8	_
Antidepressants	18	16	36	23	11	2
All other substances ³	18	27	24	13	11	3
Total drug deaths	79	81	120	104	104	34
Total drug mentions	216	190	285	184	197	_
Total deaths certified	640	610	637	646	580	_

75%

95%

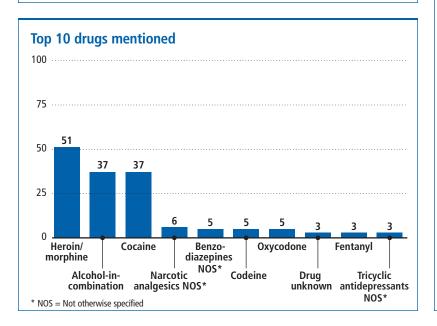
90%

Boston: Suffolk County, MA



Suffolk County, MA: Deaths and population	on, 2000
Deaths involving drug abuse	!
Total	94
Drug-induced	86
Drug-related	8
Total deaths certified	753
Population (2000)	689,807

Sex	1	Age		Race/Ethnicity	
Male	70	6-17	_	White	80
Female	24	18-24	7	Black	
		25-34	25	Hispanic	
		35-44	33	All others	
		45-97	29	•••••	



	TOTAL		Sex			Age		
		Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	39%	41%	33%	_	14%	36%	52%	34%
Number of drugs involve	d							
Single-drug	34%	39%	21%	_	14%	44%	27%	38%
Multi-drug	66%	61%	79%	—	86%	56%	73%	62%
Cause of death								
Drug-induced	91%	93%	88%	_	100%	92%	94%	86%
Drug-related	9%	7%	13%	—		8%	6%	14%
Manner of death								
Suicide	15%	6%	42%	_	_	12%	15%	21%
Accidental/unexpected	1%	1%	·····	—	·····	—	·····	3%

93%

All others

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	33	25	25	33	37	_
Cocaine	37	33	31	31	37	10
Heroin/morphine	37	37	40	48	51	14
Marijuana	_	_	_	_	1	_
Amphetamines	_	_	_	_	_	_
Methamphetamine	—			5	_	_
Club drugs ¹	—				_	_
Hallucinogens ²	—				_	_
Inhalants	1	2	2	2	_	_
Narcotic analgesics ³	37	23	23	21	23	3
Other analgesics	9	9	2	4	4	3
Benzodiazepines	8	6	8	5	7	_
Antidepressants	9	14	14	16	11	2
All other substances ³	21	17	17	2	7	_
Total drug deaths	71	74	82	100	94	32
Total drug mentions	192	166	162	167	178	_
Total deaths certified	747	750	766	771	753	—

100%

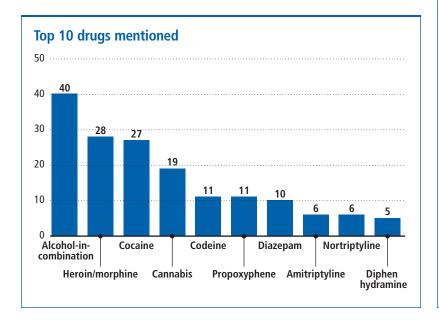
85%

Buffalo: Erie County, NY



Erie County, NY: Deaths and population, 2000						
Deaths involving drug abuse						
Total	83					
Drug-induced	37					
Drug-related	46					
Total deaths certified	943					
Population (2000)	950,265					

ex	1	Age		Race/Ethnicity	
Male	67	6-17	1	White	5
Female	15	18-24	7	Black	2
		25-34	15	Hispanic	
		35-44	27	All others	
		45-97	33		



	TOTAL	9	Sex			Age		
		Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	48%	48%	53%	100%	71%	20%	56%	48%
Number of drugs involve	d							
Single-drug	20%	19%	27%	_	_	47%	7%	24%
Multi-drug	80%	81%	73%	100%	100%	53%	93%	76%
Cause of death								
Drug-induced	45%	42%	60%	_	57%	53%	56%	30%
Drug-related	55%	58%	40%	100%	43%	47%	44%	70%
Manner of death								
Suicide	14%	15%	13%	_	29%	7%	15%	15%
Accidental/unexpected	10%	10%	·····	100%	—	20%	7%	6%
All others	76%	75%	87%	<u> </u>	71%	73%	78%	79%

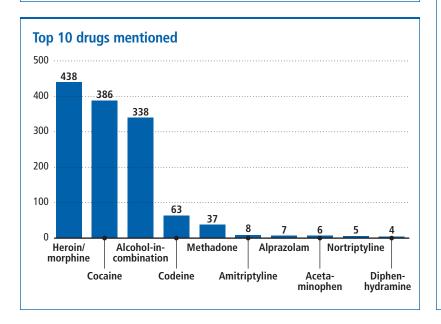
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	31	35	34	33	40	_
Cocaine	38	31	27	36	27	5
Heroin/morphine	37	42	23	37	28	5
Marijuana	8	13	17	12	19	4
Amphetamines	_	_	_	1	_	_
Methamphetamine	_	_	1	1	_	_
Club drugs ¹	_	_	1	1	2	_
Hallucinogens ²	_	_			—	_
Inhalants	_	1	3		—	_
Narcotic analgesics ³	43	51	31	26	39	3
Other analgesics	15	15	3	8	_	_
Benzodiazepines	28	25	13	18	15	_
Antidepressants	23	55	29	36	29	_
All other substances ³	60	89	42	37	30	_
Total drug deaths	115	128	82	100	83	17
Total drug mentions	283	357	224	246	229	_
Total deaths certified	1,041	972	938	987	943	

Chicago: Cook County, IL



Deaths and population, 2000 Deaths involving drug abuse					
Total	703				
Drug-induced	494				
Drug-related	209				
Total deaths certified	5,301				
Population (2000)	5,376,741				

Sex		Age		Race/Ethnicity	
Male	541	6-17	3	White	257
Female	161	18-24	50	Black	370
		25-34	139	Hispanic	74
		35-44	294	All others	2
		45-97	217		



Drug involvement in death by sex and age of decedent

		9	Sex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	48%	52%	35%	_	44%	52%	49%	47%
Number of drugs involved	d							
Single-drug	33%	31%	38%	100%	34%	33%	31%	35%
Multi-drug	67%	69%	62%	_	66%	67%	69%	65%
Cause of death								
Drug-induced	70%	71%	67%	100%	78%	73%	70%	66%
Drug-related	30%	29%	33%		22%	27%	30%	34%
Manner of death								
Suicide	8%	7%	11%	_	10%	6%	7%	9%
Accidental/unexpected	90%	91%	84%	100%	88%	93%	90%	87%
All others	3%	2%	4%	<u> </u>	2%	1%	2%	4%

Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	deaths, 2000
Alcohol-in-combination	208	268	321	329	338	_
Cocaine	286	350	409	460	386	105
Heroin/morphine	211	334	375	412	438	98
Marijuana	3	2	_	_	_	_
Amphetamines	_	1	_	_	1	_
Methamphetamine	1	_	_	_	1	_
Club drugs ¹	_	_	_	_	3	_
Hallucinogens ²	3	6	3	1	4	_
Inhalants	1	_	_	_	_	_
Narcotic analgesics ³	108	116	125	124	107	17
Other analgesics	23	17	13	14	7	_
Benzodiazepines	16	22	7	8	10	_
Antidepressants	39	52	27	24	30	6
All other substances ³	43	46	17	45	26	5
Total drug deaths	472	613	672	751	703	231
Total drug mentions	942	1,214	1,297	1,417	1,351	-
Total deaths certified	5,547	5,262	5,439	5,481	5,301	

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

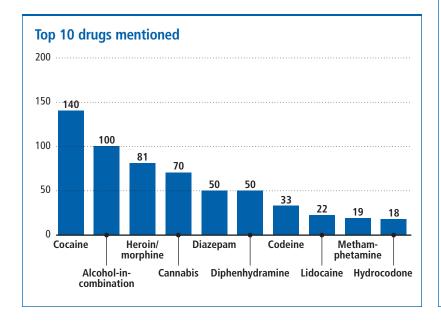
Single-drug

Dallas: Dallas County, TX



Deaths and population Deaths involving drug abus	
Total	271
Drug-induced	138
Drug-related	133
Total deaths certified	3,283
Population (2000)	2,218,899

ex	1	Age	1	Race/Ethnicity	
Male	202	6-17	4	White	150
Female	69	18-24	34	Black	89
		25-34	51	Hispanic	30
		35-44	92	All others	2
		45-97	90		



Drug involvement in death by sex and age of decedent Sex Age **Female** TOTAL Male 6-17 18-24 25-34 35-44 45-97 Alcohol involved 37% 39% 32% 50% 26% 47% 37% 34% Number of drugs involved Single-drug 18% 19% 13% 50% 12% 20% 16% 19% 82% Multi-drug 81% 87% 50% 88% 80% 84% 81% Cause of death Drug-induced 51% 46% 67% 50% 59% 45% 55% 47% Drug-related 49% 54% 33% 50% 41% 55% 45% 53% Manner of death Suicide 15% 17% 10% 25% 29% 8% 21% 13% Accidental/unexpected 58% 50% 49% 61% 71% 57% 71% All others 24% 21% 32% 25% 22% 38%

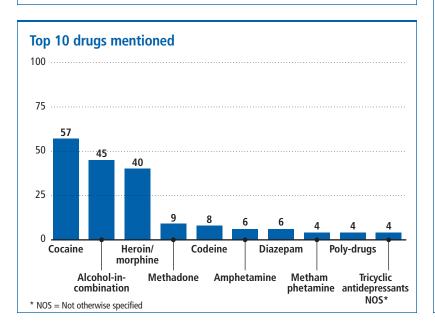
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	179	174	133	119	100	_
Cocaine	121	126	130	132	140	26
Heroin/morphine	59	62	62	68	81	4
Marijuana	109	98	85	84	70	11
Amphetamines	9	10	5	3	6	_
Methamphetamine	13	17	7	7	19	2
Club drugs ¹	2	4	2	1	6	2
Hallucinogens ²	2	—		4	7	_
Inhalants	—	—			_	_
Narcotic analgesics ³	31	49	42	46	83	1
Other analgesics	25	34	34	34	25	_
Benzodiazepines	70	52	41	45	63	_
Antidepressants	59	73	63	68	61	_
All other substances ³	149	186	156	117	167	2
Total drug deaths	318	329	316	273	271	48
Total drug mentions	828	885	760	728	828	_
Total deaths certified	3,068	2,988	3,079	2,997	3,283	_

Denver: Denver County, CO



Denver County, CO: Deaths and population, 2000 Deaths involving drug abuse Total 123 Drug-induced 95 Drug-related 28 Total deaths certified 2,943 Population (2000) 554,636

Sex		Age		Race/Ethnicity	
Male	92	6-17	2	White	7
Female	27	18-24	7	Black	1
		25-34	25	Hispanic	2
		35-44	43	All others	
		45-97	46	***************************************	



Drug involvement in death by sex and age of decedent

		9	Sex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	37%	38%	30%	50%	14%	48%	28%	41%
Number of drugs involved	d							
Single-drug	39%	41%	30%	50%	57%	36%	35%	41%
Multi-drug	61%	59%	70%	50%	43%	64%	65%	59%
Cause of death								
Drug-induced	77%	77%	81%	50%	71%	92%	79%	70%
Drug-related	23%	23%	19%	50%	29%	8%	21%	30%
Manner of death								
Suicide	12%	12%	15%	50%	14%	8%	9%	15%
Accidental/unexpected	72%	72%	74%	<u> </u>	86%	88%	70%	67%
All others	15%	16%	11%	50%	·····	4%	21%	17%

Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	32	36	42	52	45	_
Cocaine	41	40	45	56	57	20
Heroin/morphine	23	42	35	63	40	14
Marijuana	—	-	-	-	—	_
Amphetamines	—	1	1	3	6	_
Methamphetamine	—	1	1	5	4	_
Club drugs ¹	—				1	1
Hallucinogens ²	—	_	_		1	1
Inhalants	—	_	1		—	_
Narcotic analgesics ³	15	20	8	28	29	6
Other analgesics	2	2	3	2	5	1
Benzodiazepines	4	2	2	16	14	_
Antidepressants	6	14	14	15	14	3
All other substances ³	11	4	11	12	23	2
Total drug deaths	72	84	84	135	123	48
Total drug mentions	134	162	163	252	239	_
Total deaths certified	2,721	2,885	2,879	2,940	2,943	_

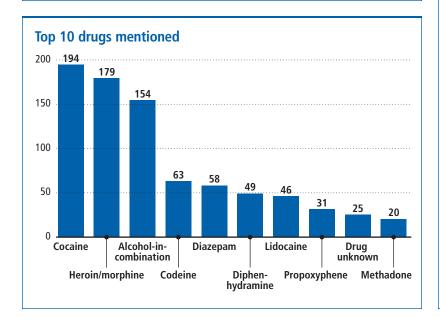
¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

Detroit: Wayne County, MI



Wayne County, MI: Deaths and population	
Deaths involving drug abus	e
Total	402
Drug-induced	211
Drug-related	191
Total deaths certified	3,327
Population (2000)	2,061,162

ex		Age		Race/Ethnicity	
Male	285	6-17	3	White	168
Female	115	18-24	11	Black	230
		25-34	49	Hispanic	
		35-44	140	All others	
		45-97	199		



		9	Sex	l		Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	38%	41%	32%	_	64%	47%	39%	35%
Number of drugs involve	d							
Single-drug	18%	17%	18%	33%	_	14%	14%	22%
Multi-drug	82%	83%	82%	67%	100%	86%	86%	78%
Cause of death								
Drug-induced	52%	54%	49%	33%	36%	59%	66%	43%
Drug-related	48%	46%	51%	67%	64%	41%	34%	57%
Manner of death								
Suicide	4%	4%	5%	_	9%	8%	3%	4%
Accidental/unexpected	60%	63%	53%	33%	45%	78%	76%	45%
All others	36%	33%	42%	67%	45%	14%	21%	51%

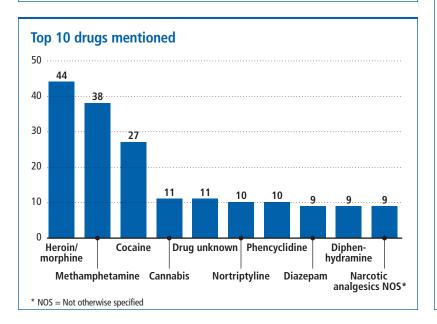
Drug category	1996	1997	1998	1999	2000	Single-dru deaths, 2000
Alcohol-in-combination	107	92	111	122	154	_
Cocaine	172	174	186	169	194	31
Heroin/morphine	104	145	148	127	179	27
Marijuana	—				_	_
Amphetamines	1	_	_	_	1	_
Methamphetamine	_	_	_	_	_	_
Club drugs ¹	1	_	1	1	2	_
Hallucinogens ²	—		1		_	_
Inhalants	2	3		1	_	_
Narcotic analgesics ³	111	127	150	169	152	4
Other analgesics	4	11	9	13	17	_
Benzodiazepines	48	77	81	73	88	1
Antidepressants	70	69	103	95	86	1
All other substances ³	172	304	294	363	299	7
Total drug deaths	319	364	412	412	402	71
Total drug mentions	792	1,002	1,084	1,133	1,172	_
Total deaths certified	3,090	3,046	2,928	3,316	3,327	_

Long Island: Nassau County, NY



Nassau County, NY: Deaths and populati	on, 2000
Deaths involving drug abuse	e
Total	102
Drug-induced	60
Drug-related	42
Total deaths certified	4,817
Population (2000)	1,334,544

ex		Age	1	Race/Ethnicity	
Male	81	6-17	3	White	8
Female	21	18-24	14	Black	1
		25-34	20	Hispanic	_
		35-44	30	All others	
		45-97	35		



			Sex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	6%	6%	5%	_	_	25%	3%	_
Number of drugs involved								
Single-drug	33%	37%	19%	67%	57%	20%	20%	40%
Multi-drug	67%	63%	81%	33%	43%	80%	80%	60%
Cause of death								
Drug-induced	59%	54%	76%	_	43%	70%	63%	60%
Drug-related	41%	46%	24%	100%	57%	30%	37%	40%

48%

48%

5%

100%

10%

63%

27%

10%

75%

15%

79%

20%

51%

29%

15%

65%

69%

25%

Suicide

All others

Accidental/unexpected

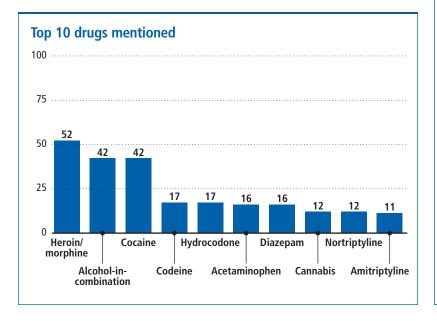
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	26	22	_	7	6	_
Cocaine	53	37	39	54	27	1
Heroin/morphine	31	32	35	38	44	7
Marijuana	50	53	4	18	11	_
Amphetamines	—	_				_
Methamphetamine	—	—	<u> </u>	42	38	3
Club drugs ¹	1	1	2		1	1
Hallucinogens ²	1	—	1	8	10	_
Inhalants	—	2	3	1	1	_
Narcotic analgesics ³	36	20	13	27	20	1
Other analgesics	17	7	6	10	14	2
Benzodiazepines	39	9	10	11	10	_
Antidepressants	39	12	22	31	33	2
All other substances ³	56	38	35	28	44	17
Total drug deaths	132	108	85	103	102	34
Total drug mentions	349	233	170	275	259	_
Total deaths certified	5,027	5,007	4,675	4,628	4,817	_

Long Island: Suffolk County, NY



Suffolk County, NY: Deaths and populati	ion, 2000
Deaths involving drug abus	e
Total	107
Drug-induced	94
Drug-related	13
Total deaths certified	4,402
Population (2000)	1,419,369

ex	1	Age	1	Race/Ethnicity	
Male	69	6-17	_	White	94
Female	23	18-24	5	Black	
		25-34	22	Hispanic	
		35-44	36	All others	
		45-97	44	•••••	



			Sex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	39%	42%	22%	_	40%	45%	39%	36%
Number of drugs invol	lved							
Single-drug	7%	4%	9%	_	20%	_	8%	7%
Multi-drug	93%	96%	91%	—	80%	100%	92%	93%
Cause of death								
Drug-induced	88%	86%	91%	_	100%	91%	86%	86%
Drug-related	12%	14%	9%	—	·····	9%	14%	14%
Manner of death								
Suicide	15%	9%	35%	_	_	_	11%	27%

Accidental/unexpected

All others

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	19	22	34	36	42	_
Cocaine	37	19	38	40	42	3
Heroin/morphine	33	36	37	67	52	3
Marijuana	13	14	19	25	12	_
Amphetamines	_	_	2	_	_	_
Methamphetamine	—	-	2	—	_	_
Club drugs ¹	—	-	—	1	2	_
Hallucinogens ²	—	-	1	1	_	_
Inhalants	2	1	2	—	2	_
Narcotic analgesics ³	13	20	29	42	53	1
Other analgesics	9	13	19	21	22	_
Benzodiazepines	19	20	23	25	21	_
Antidepressants	24	7	31	46	63	_
All other substances ³	35	32	73	74	64	_
Total drug deaths	73	62	88	112	107	7
Total drug mentions	204	184	310	378	375	_
Total deaths certified	4,342	4,154	4,275	4,256	4,402	—

20%

68%

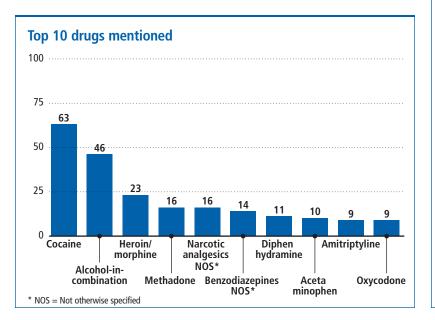
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Milwaukee: Milwaukee County, WI



Deaths and population, 2000 Deaths involving drug abuse						
Total	110					
Drug-induced	89					
Drug-related	21					
Total deaths certified	1,936					
Population (2000)	940,164					

ex		Age	1	Race/Ethnicity	
Male	78	6-17	_	White	52
Female	32	18-24	_	Black	4
		25-34	18	Hispanic	1.
		35-44	44	All others	
		45-97	48	• • • • • • • • • • • • • • • • • • • •	



Drug involvemer	nt in death	by sex	and age	of dece	dent		
			Sex	l		Age	
	TOTAL	Male	Female	6-17	18-24	25-34	35-
Alcohol involved	42%	46%	31%	_	_	39%	39
Number of drugs invol	ved						
Single-drug	16%	21%	6%	_	_	11%	18

	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	42%	46%	31%	_	_	39%	39%	46%
Number of drugs involve	d							
Single-drug	16%	21%	6%	_	_	11%	18%	17%
Multi-drug	84%	79%	94%	—	·····	89%	82%	83%
Cause of death								
Drug-induced	81%	82%	78%	_	_	78%	82%	81%
Drug-related	19%	18%	22%	—	·····	22%	18%	19%
Manner of death								
Suicide	22%	12%	47%	_	_	28%	20%	21%
Accidental/unexpected	65%	77%	38%	—	·····	67%	68%	63%
All others	13%	12%	16%	—	·····	6%	11%	17%

Drug mentions	by drug	category
----------------------	---------	----------

Drug category	1996	1997	1998	1999	2000	deaths,
Alcohol-in-combination	_	_	_	_	46	_
Cocaine	_	_	_	_	63	12
Heroin/morphine	_	_	_	_	23	2
Marijuana	_	_	_	_	5	_
Amphetamines	_	_	_	_	_	_
Methamphetamine	_	_	_	_	_	_
Club drugs ¹	_	_	_	_	_	_
Hallucinogens ²	_	_	_	—	—	—
Inhalants	_	_	_	—	—	—
Narcotic analgesics ³	_	_	_	-	60	_
Other analgesics	_	_	_	—	16	_
Benzodiazepines	_	_	_	—	28	_
Antidepressants	_	_	_	—	30	1
All other substances ³				_	47	3
Total drug deaths	_	_	_	_	110	18
Total drug mentions	-	_	_	_	318	<u> </u>
Total deaths certified	—		—		1,936	—

1 Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. 2 Includes PCP, LSD, and miscellaneous hallucinogens. 3 Not tabulated above.

Single-drug

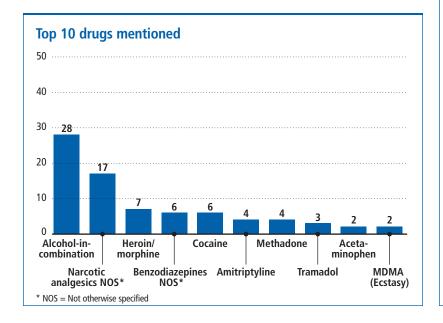
Minneapolis-St. Paul: Hennepin County, MN



Hennepin County, MN: Deaths and population, 2000				
Deaths involving drug abuse	e			
Total	52			
Drug-induced	48			
Drug-related	4			
Total deaths certified	1,314			
Population (2000)	1,116,200			

All others

Sex		Age	1	Race/Ethnicity	
Male	34	6-17	_	White	38
Female	18	18-24	2	Black	11
		25-34	7	Hispanic	
		35-44	22	All others	
		45-97	21		



		Sex				Age	Age	
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	54%	62%	39%	_	50%	71%	55%	48%
Number of drugs involve	d							
Single-drug	38%	35%	44%	_	50%	29%	36%	43%
Multi-drug	62%	65%	56%	—	50%	71%	64%	57%
Cause of death								
Drug-induced	92%	91%	94%	_	100%	86%	95%	90%
Drug-related	8%	9%	6%	—		14%	5%	10%
Manner of death								
Suicide	31%	12%	67%	_	_	43%	18%	43%
Accidental/unexpected	58%	74%	28%	—	50%	43%	73%	48%

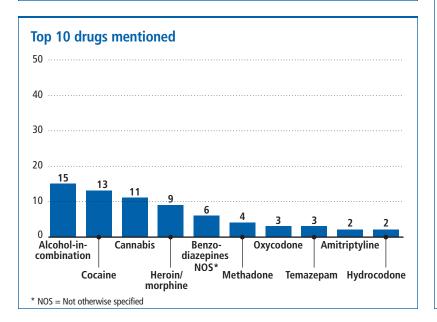
Drug category	1996	1997	1998	1999	2000	Single-dru deaths, 2000
Alcohol-in-combination	4	24	27	24	28	_
Cocaine	1	27	8	13	6	3
Heroin/morphine	—	18	21	16	7	4
Marijuana	—	_	_	_	—	<u> </u>
Amphetamines	1	1	_	_	—	<u> </u>
Methamphetamine	1	2	2	2	—	<u> </u>
Club drugs ¹	—	_	1	1	2	1
Hallucinogens ²	_	_	_	_	—	_
Inhalants	—	1			—	—
Narcotic analgesics ³	5	16	13	8	25	5
Other analgesics	1	2	2	2	6	2
Benzodiazepines	1	6	1	2	7	<u> </u>
Antidepressants	6	10	23	15	7	3
All other substances ³	3	15	12	4	11	2
Total drug deaths	16	57	56	45	52	20
Total drug mentions	23	122	110	87	99	<u> </u>
Total deaths certified	1,381	1,401	1,348	1,274	1,314	— — — — — — — — — — — — — — — — — — —

Minneapolis-St. Paul: Ramsey County, MN



Ramsey County, MN: Deaths and population	on, 2000
Deaths involving drug abuse	
Total	36
Drug-induced	18
Drug-related	18
Total deaths certified	1,344
Population (2000)	511,035

Sex		Age	1	Race/Ethnicity	
Male	28	6-17	1	White	27
Female	8	18-24	1	Black	7
		25-34	12	Hispanic	2
		35-44	13	All others	_
		45-97	9	***************************************	



Drug involvement in death by sex and age of decedent Age TOTAL Male 6-17 25-34 35-44 45-97 Female 18-24 42% Alcohol involved 50% 13% 100% 33% 46% 44% Number of drugs involved Single-drug 31% 29% 38% 100% 33% 15% 44% Multi-drug 69% 67% 85% 71% 63% 100% 56% Cause of death Drug-induced 50% 46% 63% 100% 58% 38% 56% Drug-related 54% 38% 100% 42% 62% 44% Manner of death Suicide 17% 13% 23% 33%

63%

25%

100%

100%

67%

33%

69%

8%

22%

44%

Accidental/unexpected

All others

58%

25%

57%

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	10	12	12	9	15	_
Cocaine	7	8	8	17	13	2
Heroin/morphine	2	7	10	11	9	3
Marijuana	9	9	12	9	11	3
Amphetamines	1	2	6	3	1	_
Methamphetamine	2	2	4	3	2	_
Club drugs ¹	—	_		1	2	1
Hallucinogens ²	—	_			_	_
Inhalants	—	_			_	_
Narcotic analgesics ³	3	11	12	18	11	1
Other analgesics	7	5	6	7	1	_
Benzodiazepines	1	4	7	8	12	1
Antidepressants	10	5	10	13	5	_
All other substances ³	8	11	16	14	5	_
Total drug deaths	27	29	39	37	36	11
Total drug mentions	60	76	103	113	87	_
Total deaths certified	1,182	1,276	1,302	1,253	1,344	—

New Orleans: Orleans Parish, LA



Orleans Parish, LA: Deaths and population, 2000						
Deaths involving drug abuse						
Total	103					
Drug-induced	72					
Drug-related	31					
Total deaths certified	1,844					
Population (2000)	484,674					

Suicide

All others

Accidental/unexpected

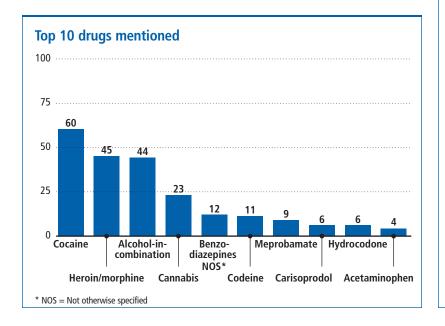
17%

43%

15%

44%

ex		Age	1	Race/Ethnicity	
Male	85	6-17	_	White	45
Female	16	18-24	16	Black	55
		25-34	19	Hispanic	_
		35-44	36	All others	
		45-97	32	• • • • • • • • • • • • • • • • • • • •	



Drug involvement in death by sex and age of decedent Sex Age TOTAL Male **Female** 6-17 18-24 25-34 35-44 45-97 Alcohol involved 43% 45% 31% 25% 37% 56% 41% Number of drugs involved Single-drug 22% 22% 19% 38% 26% 11% 25% 78% Multi-drug 78% 81% 63% 74% 89% 75% Cause of death Drug-induced 70% 65% 94% 81% 58% 75% 66% Drug-related 30% 35% 6% 19% 42% 25% 34% Manner of death

31%

31%

38%

13%

56%

31%

32%

21%

47%

14%

47%

39%

16%

34%

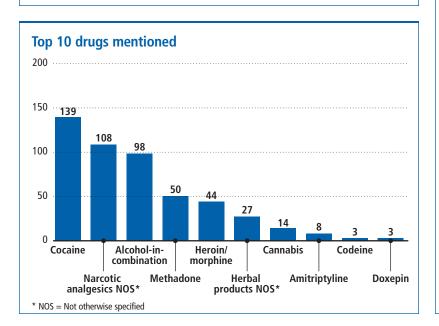
Drug category	1996	1997	1998	1999	2000	Single-dru deaths, 2000
Alcohol-in-combination	30	19	25	41	44	_
Cocaine	38	36	36	50	60	10
Heroin/morphine	15	16	28	37	45	4
Marijuana	9	13	21	21	23	6
Amphetamines	_	_	_	_	_	_
Methamphetamine	_	_	_	_	_	_
Club drugs¹	1	_	1	4	2	_
Hallucinogens ²	_	_	_	1	_	_
Inhalants	_	—	—	_	_	_
Narcotic analgesics ³	7	13	21	52	25	_
Other analgesics	6	8	7	3	6	_
Benzodiazepines	2	—	14	6	13	1
Antidepressants	2	4	2	12	7	_
All other substances ³	4	15	12	37	25	2
Total drug deaths	60	56	76	94	103	23
Total drug mentions	114	124	167	264	250	_
Total deaths certified	2,243	2,086	2,027	1,895	1,844	

New York: Bronx County, NY



Bronx County, NY: Deaths and population, 2000							
Deaths involving drug abus	e						
Total	239						
Drug-induced	169						
Drug-related	70						
Total deaths certified	1,730						
Population (2000)	1,332,650						

ex		Age	1	Race/Ethnicity	
Male	172	6-17	_	White	52
Female	65	18-24	10	Black	8′
		25-34	38	Hispanic	105
		35-44	94	All others	
		45-97	97		



Drug involvement in death by sex and age of decedent

		9	Sex	l		Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	41%	46%	28%	_	10%	45%	50%	34%
Number of drugs involved	d							
Single-drug	28%	25%	37%	_	10%	29%	23%	35%
Multi-drug	72%	75%	63%	—	90%	71%	77%	65%
Cause of death								
Drug-induced	71%	73%	66%	_	70%	76%	71%	68%
Drug-related	29%	27%	34%	<u> </u>	30%	24%	29%	32%
Manner of death								
Suicide	4%	4%	5%	_	10%	11%	2%	3%
Accidental/unexpected	77%	83%	62%	_	80%	76%	82%	72%
All others	19%	13%	34%	<u> </u>	10%	13%	16%	25%

Drug mentions by drug category

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	106	88	76	60	98	_
Cocaine	143	133	105	97	139	47
Heroin/morphine	48	61	58	46	44	1
Marijuana	23	6	6	3	14	—
Amphetamines	—	·····	·····	·····	—	—
Methamphetamine	—	1	·····	1	—	_
Club drugs ¹	1	_	1	<u> </u>	1	_
Hallucinogens ²	_	_	_	1	1	1
Inhalants	1	_		<u> </u>	_	_
Narcotic analgesics ³	107	97	55	56	163	17
Other analgesics	2	2	4	_	3	_
Benzodiazepines	10	11		1	3	_
Antidepressants	17	16	8	5	13	2
All other substances ³	24	11	8	16	32	_
Total drug deaths	221	224	181	169	239	68
Total drug mentions	482	426	321	286	511	_
Total deaths certified	1,901	1,990	1,746	1,832	1,730	_

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

New York: Kings County (Brooklyn), NY



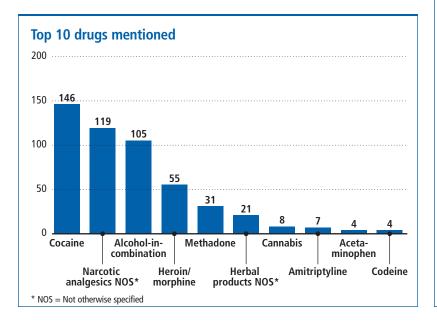
Kings County, NY: Deaths and population, 2000 Deaths involving drug abuse Total 261 Drug-induced 218 Drug-related 43 Total deaths certified 2,571 Population (2000) 2,465,326

Suicide

All others

Accidental/unexpected

Sex		Age		Race/Ethnicity	
Male	201	6-17	1	White	96
Female	60	18-24	15	Black	106
		25-34	56	Hispanic	57
		35-44	94	All others	2
		45-97	95	•••••	



Drug involvement in death by sex and age of decedent Sex Age TOTAL Male Female 6-17 18-24 25-34 35-44 45-97 Alcohol involved 40% 44% 27% 47% 41% 37% 42% Number of drugs involved Single-drug 33% 31% 38% 100% 20% 32% 35% 33% 67% Multi-drug 69% 62% 80% 68% 65% 67% Cause of death Drug-induced 84% 83% 85% 100% 87% 89% 87% 76% Drug-related 16% 17% 15% 13% 11% 13% 24% Manner of death

78%

17%

100%

5%

84%

11%

12%

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	110	112	87	90	105	_
Cocaine	170	117	123	110	146	63
Heroin/morphine	54	78	56	50	55	_
Marijuana	24	9	8	2	8	_
Amphetamines	_	_	_	_	_	_
Methamphetamine	—	2			1	_
Club drugs ¹	—	2			2	_
Hallucinogens ²	—	_		1	2	_
Inhalants	—	_			_	_
Narcotic analgesics ³	130	98	83	71	159	19
Other analgesics	3	8	6	3	7	2
Benzodiazepines	11	8	2		5	_
Antidepressants	20	19	12	5	15	1
All other substances ³	46	8	6	14	27	1
Total drug deaths	279	238	207	196	261	86
Total drug mentions	568	461	383	346	532	_
Total deaths certified	3,076	2,670	2,779	2,753	2,571	_

20%

3%

85%

12%

5%

86%

9%

5%

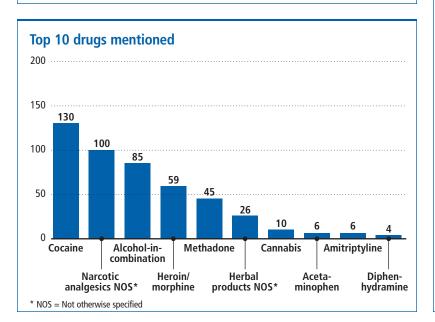
78%

New York: New York County (Manhattan), NY



New York County, N' Deaths and populati	
Deaths involving drug abus	e
Total	246
Drug-induced	184
Drug-related	62
Total deaths certified	2,496
Population (2000)	1,537,195

ex	1	Age		Race/Ethnicity	
Male	179	6-17	1	White	109
Female	63	18-24	12	Black	90
		25-34	42	Hispanic	44
		35-44	90	All others	3
		45-97	101		



Drug involvement in death by sex and age of decedent Age Sex TOTAL Male **Female** 6-17 18-24 25-34 35-44 45-97 35% Alcohol involved 34% 32% 58% 40% 32% 32% Number of drugs involved Single-drug 31% 31% 33% 17% 26% 31% 35% 69% 74% 69% Multi-drug 69% 67% 100% 83% 65% Cause of death Drug-induced 75% 74% 78% 100% 67% 86% 80% 66% Drug-related 26% 22% 33% 14% 20% 34% Manner of death Suicide 17% 33% 5% 10% 7%

62%

21%

100%

Accidental/unexpected

All others

72%

19%

76%

18%

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	147	122	97	102	85	_
Cocaine	230	170	136	126	130	51
Heroin/morphine	51	85	68	49	59	_
Marijuana	33	16	6	9	10	_
Amphetamines	2	_	_	_	1	_
Methamphetamine	_	1	_	1	2	1
Club drugs ¹	1	3	_	4	2	1
Hallucinogens ²	3	1		1	1	_
Inhalants	—	_			_	_
Narcotic analgesics ³	178	82	68	92	155	20
Other analgesics	12	13	13	10	11	2
Benzodiazepines	19	10	2	4	6	_
Antidepressants	28	16	10	8	13	_
All other substances ³	56	24	7	24	43	1
Total drug deaths	366	285	227	235	246	76
Total drug mentions	760	543	407	430	518	_
Total deaths certified	2,909	2,497	2,373	2,390	2,496	

77%

13%

62%

31%

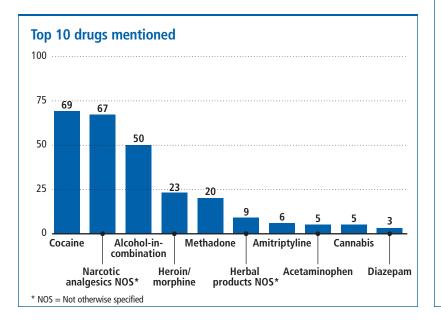
86%

New York: Queens County, NY



Queens County, NY: Deaths and population, 2000				
Deaths involving drug abuse				
Total	150			
Drug-induced	117			
Drug-related	33			
Total deaths certified	1,850			
Population (2000)	2,229,379			

Sex		Age	1	Race/Ethnicity	
Male	115	6-17	_	White	87
Female	35	18-24	8	Black	39
		25-34	25	Hispanic	2
		35-44	60	All others	
		45-97	57		



Drug involvement in death by sex and age of decedent Sex Age TOTAL Male Female 6-17 18-24 25-34 35-44 Alcohol involved 33% 35% 29% — 38% 12% 38% Number of drugs involved Single-drug 33% 32% 34% — — 44% 33% Multi-drug 67% 68% 66% — 100% 56% 67%

Alconol involved	33%	35%	29%	_	38%	12%	38%	3/%
Number of drugs involved								
Single-drug	33%	32%	34%	_	_	44%	33%	32%
Multi-drug	67%	68%	66%		100%	56%	67%	68%
Cause of death								
Drug-induced	78%	78%	77%	_	75%	80%	80%	75%
Drug-related	22%	22%	23%		25%	20%	20%	25%
Manner of death								
Suicide	14%	13%	17%	_	25%	4%	8%	23%
Accidental/unexpected	71%	72%	66%		75%	88%	75%	58%
All others	15%	15%	17%	—	—	8%	17%	19%

45-97

Single-drug

Drug	mentions	by	drug	category
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Drug category	1996	1997	1998	1999	2000	deaths, 2000
Alcohol-in-combination	52	55	46	45	50	_
Cocaine	90	70	62	50	69	32
Heroin/morphine	33	34	41	21	23	
Marijuana	25	7	6	2	5	
Amphetamines	1	1	_		_	
Methamphetamine	_	1	_		_	
Club drugs ¹	_	1	_		_	
Hallucinogens ²	1	_	_		2	
Inhalants	1	_	_		_	
Narcotic analgesics ³	78	46	42	43	92	11
Other analgesics	7	5	5	9	7	2
Benzodiazepines	13	4	2	5	7	
Antidepressants	14	7	7	10	10	
All other substances ³	24	11	4	17	22	4
Total drug deaths	171	129	119	106	150	49
Total drug mentions	339	242	215	202	287	_
Total deaths certified	2,153	1,987	1,853	2,039	1,850	_

¹ Includes Ecstasy [MDMA], Ketamine, GHB-GBL, and Rohypnol. ² Includes PCP, LSD, and miscellaneous hallucinogens. ³ Not tabulated above.

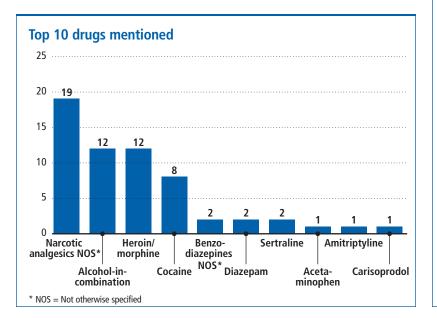
New York: Richmond County (Staten Island), NY



Richmond County, N' Deaths and population	
Deaths involving drug abuse	<u> </u>
Total	27
Drug-induced	24
Drug-related	3
Total deaths certified	271
Population (2000)	443,728

All others

ex		Age		Race/Ethnicity	
Male	23	6-17	_	White	2
Female	4	18-24	1	Black	
		25-34	8	Hispanic	
		35-44	15	All others	
		45-97	3	•••••	



Drug involvement in death by sex and age of decedent Age 25-34 TOTAL Male **Female** 6-17 35-44 45-97 18-24 44% 48% 47% Alcohol involved 25% 38% 67% Number of drugs involved Single-drug 19% 17% 25% 100% 13% 20% Multi-drug 81% 83% 75% 88% 80% 100% Cause of death Drug-induced 89% 91% 75% 100% 88% 87% 100% Drug-related 25% 13% 13% Manner of death Suicide 11% 13% 13% 33% 78% Accidental/unexpected 83% 50% 100% 73%

50%

4%

11%

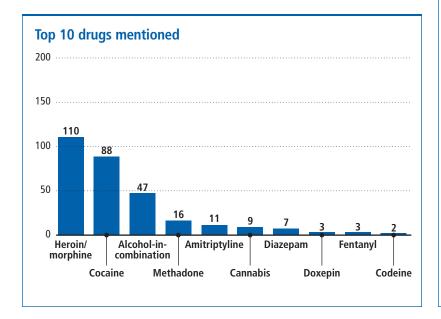
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	18	13	9	11	12	_
Cocaine	26	11	11	9	8	3
Heroin/morphine	6	11	7	5	12	—
Marijuana	9	—	4	2	_	—
Amphetamines	—		—	—	—	
Methamphetamine	—	—			_	—
Club drugs ¹	—	_	1		_	_
Hallucinogens ²	—	_			_	_
Inhalants					_	—
Narcotic analgesics ³	17	12	4	7	21	2
Other analgesics	3	2	3	1	2	—
Benzodiazepines	4	1		2	4	—
Antidepressants	2	2	1	2	3	_
All other substances ³	7	4	_	3	1	_
Total drug deaths	44	31	21	20	27	5
Total drug mentions	92	56	40	42	63	<u> </u>
Total deaths certified	314	338	340	261	271	

Newark: Essex County, NJ



on, 2000
158
129
29
2,487
793,633

ex		Age		Race/Ethnicity	
Male	114	6-17	2	White	40
Female	44	18-24	11	Black	100
		25-34	37	Hispanic	15
		35-44	70	All others	3
		45-97	38	•••••	



Drug involvemen	it in death			ot dece	aent			
			Sex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	30%	32%	23%	_	27%	32%	31%	26%
Number of drugs invol	ved							
Single-drug	29%	31%	25%	100%	9%	27%	31%	29%
Multi-drug	71%	69%	75%		91%	73%	69%	71%
Cause of death								
Drug-induced	82%	82%	80%	_	73%	84%	89%	74%
Drug-related	18%	18%	20%	100%	27%	16%	11%	26%
Manner of death								
Suicide	2%	3%	_	_	9%	_	1%	3%

100%

100%

100%

Accidental/unexpected

All others

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	57	50	35	50	47	_
Cocaine	111	104	86	92	88	18
Heroin/morphine	92	94	61	81	110	20
Marijuana	11	20	14	18	9	4
Amphetamines	—	—	<u> </u>		—	_
Methamphetamine	—	—	<u> </u>		1	_
Club drugs ¹	—	—	<u> </u>		1	_
Hallucinogens ²	—	—	<u> </u>		1	_
Inhalants	—	—	<u> </u>		—	_
Narcotic analgesics ³	20	13	15	22	25	3
Other analgesics	9	5	2	5	—	_
Benzodiazepines	24	13	12	11	9	_
Antidepressants	12	20	11	11	22	1
All other substances ³	9	7	8	6	2	_
Total drug deaths	160	145	127	144	158	46
Total drug mentions	345	326	244	296	315	_
Total deaths certified	2,739	2,446	2,738	2,620	2,487	_

95%

3%

Philadelphia: Camden County, NJ



Camden County, NJ: Deaths and population	on, 2000
Deaths involving drug abuse	
Total	117
Drug-induced	68
Drug-related	49
Total deaths certified	1,497
Population (2000)	508,932

Suicide

All others

Accidental/unexpected

16%

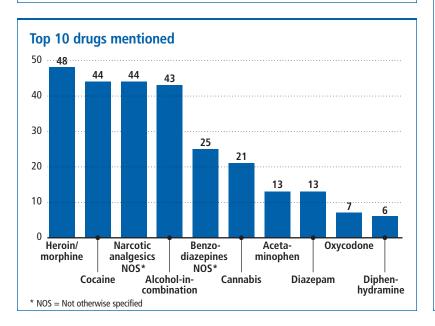
62%

15%

64%

21%

Sex		Age		Race/Ethnicity	
Male	91	6-17	2	White	8
Female	24	18-24	15	Black	1
		25-34	31	Hispanic	1
		35-44	37	All others	_
		45-97	32		



	TOTAL		Sex			Age		
		Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	37%	38%	33%	_	47%	42%	32%	34%
Number of drugs involved								
Single-drug	17%	19%	8%	100%	7%	13%	19%	19%
Multi-drug	83%	81%	92%	_	93%	87%	81%	81%
Cause of death								
Drug-induced	58%	59%	50%	_	67%	71%	62%	41%
Drug-related	42%	41%	50%	100%	33%	29%	38%	59%

21%

54%

25%

100%

19%

61%

19%

7%

22%

50%

28%

62%

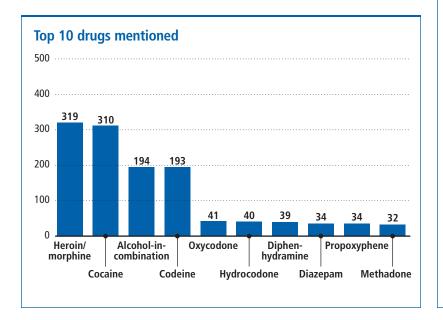
Drug category	1996	1997	1998	1999	2000	Single-dru deaths, 2000
Alcohol-in-combination	5	41	32	43	43	_
Cocaine	2	60	32	51	44	6
Heroin/morphine	6	75	31	42	48	3
Marijuana	4	22	28	18	21	6
Amphetamines	-	1	1	1	_	_
Methamphetamine	-	1	1		_	_
Club drugs ¹	-		_	1	_	_
Hallucinogens ²	-	1	4	2	2	_
Inhalants	-	3	1	4	_	_
Narcotic analgesics ³	2	31	28	27	64	3
Other analgesics	2	16	13	20	21	_
Benzodiazepines	3	62	46	44	52	1
Antidepressants	1	12	20	7	27	_
All other substances ³	2	50	25	45	35	1
Total drug deaths	12	127	98	108	117	20
Total drug mentions	27	375	262	305	357	<u> </u>
Total deaths certified	1,518	1,642	1,446	1,397	1,497	_

Philadelphia: Philadelphia County, PA



, PA: ion, 2000
e
528
415
113
5,666
1,517,550

ex		Age		Race/Ethnicity	
Male	385	6-17	3	White	285
Female	141	18-24	47	Black	199
		25-34	109	Hispanic	4.
		35-44	185	All others	
		45-97	184		



			Sex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	37%	40%	27%	_	28%	38%	43%	33%
Number of drugs involve	d							
Single-drug	15%	14%	17%	_	15%	12%	10%	22%
Multi-drug	85%	86%	83%	100%	85%	88%	90%	78%
Cause of death								
Drug-induced	79%	79%	77%	100%	83%	78%	82%	74%
Drug-related	21%	21%	23%	_	17%	22%	18%	26%
Manner of death								
Suicide	9%	9%	9%	_	4%	11%	5%	12%
Accidental/unexpected	75%	76%	71%	67%	94%	83%	79%	61%
All others	16%	15%	20%	33%	2%	6%	15%	27%

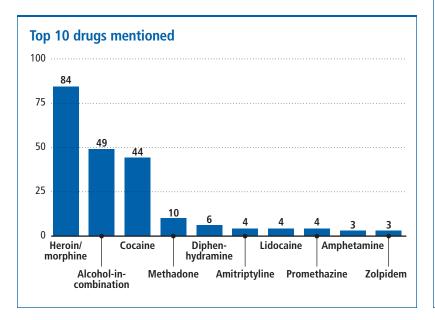
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	136	160	137	144	194	_
Cocaine	244	326	276	293	310	55
Heroin/morphine	268	380	272	254	319	13
Marijuana	1	_			_	_
Amphetamines	9	9	4	9	3	_
Methamphetamine	10	13	4	5	3	_
Club drugs ¹	_	1		6	5	1
Hallucinogens ²	14	25	24	22	25	5
Inhalants	1	2		1	_	_
Narcotic analgesics ³	184	311	221	271	348	2
Other analgesics	17	40	27	10	12	_
Benzodiazepines	67	80	95	58	72	2
Antidepressants	54	94	170	127	156	_
All other substances ³	164	198	212	203	234	1
Total drug deaths	429	554	467	453	528	79
Total drug mentions	1,169	1,639	1,442	1,403	1,681	_
Total deaths certified	5,748	5,710	5,632	5,841	5,666	_

Portland: Multnomah County, OR



Multnomah County, OR: Deaths and population, 2000				
Deaths involving drug abuse				
Total	119			
Drug-induced	110			
Drug-related	9			
Total deaths certified	839			
Population (2000)	660,486			

ex	1	Age	1	Race/Ethnicity	
Male	93	6-17	_	White	99
Female	25	18-24	6	Black	1′
		25-34	22	Hispanic	3
		35-44	48	All others	(
		45-97	43	•••••	



	TOTAL		Sex			Age		
		Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	41%	44%	32%	_	33%	41%	44%	40%
Number of drugs involve	d							
Single-drug	29%	31%	24%	_	50%	36%	21%	33%
Multi-drug	71%	69%	76%	—	50%	64%	79%	67%
Cause of death								
Drug-induced	92%	94%	92%	_	67%	95%	98%	88%
Drug-related	8%	6%	8%	—	33%	5%	2%	12%
Manner of death								
Suicide	11%	10%	16%	_	33%	14%	10%	7%
Accidental/unexpected	78%	82%	68%	<u> </u>	67%	68%	83%	79%

16%

11%

All others

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	66	66	62	68	49	_
Cocaine	44	38	45	54	44	6
Heroin/morphine	100	98	104	125	84	18
Marijuana	1			_	—	—
Amphetamines	10	4	3	13	3	1
Methamphetamine	6	4	5	3	—	_
Club drugs ¹	—				1	1
Hallucinogens ²	—			1	—	—
Inhalants	3		1		—	—
Narcotic analgesics ³	14	8	10	19	16	5
Other analgesics	1	2		3	—	_
Benzodiazepines	1	3	7	5	1	_
Antidepressants	16	15	5	16	16	_
All other substances ³	7	7	6	16	28	4
Total drug deaths	140	127	129	162	119	35
Total drug mentions	269	245	248	323	242	_
Total deaths certified	915	931	862	872	839	<u> </u>

6%

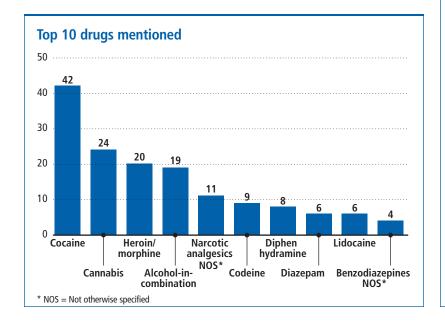
18%

St. Louis: St. Louis City, MO



St. Louis City, MO: Deaths and population	on, 2000
Deaths involving drug abuse	
Total	74
Drug-induced	9
Drug-related	65
Total deaths certified	2,460
Population (2000)	348,189

Sex	1	Age	1	Race/Ethnicity	
Male	54	6-17	2	White	38
Female	20	18-24	6	Black	3!
		25-34	19	Hispanic	-
		35-44	31	All others	
		45-97	16	***************************************	



Drug involvement in death by sex and age of decedent Sex Age TOTAL Male **Female** 6-17 18-24 25-34 35-44 45-97 Alcohol involved 26% 30% 15% 50% 26% 26% 19% Number of drugs involved Single-drug 26% 30% 15% 50% 17% 32% 19% 31% 74% Multi-drug 70% 85% 50% 83% 68% 81% 69% Cause of death Drug-induced 12% 6% 30% 33% 5% 13% 13% 88% Drug-related 94% 70% 100% 67% 95% 87% 88% Manner of death Suicide 11% 5% 33% 13% 5% Accidental/unexpected 56% 75% 100% 89% 52% 38% All others 30% 33% 20% 5% 35% 63%

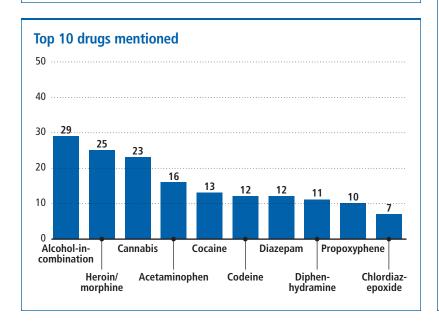
Drug category	1996	1997	1998	1999	2000	Single-dru deaths, 2000
Alcohol-in-combination	12	20	15	17	19	_
Cocaine	46	50	51	47	42	11
Heroin/morphine	28	29	27	27	20	—
Marijuana	34	24	24	32	24	6
Amphetamines	_	_	_	_	_	_
Methamphetamine	_	2	2	1	1	_
Club drugs¹	_	_	_	2	2	_
Hallucinogens ²	3	—	1	_	2	1
Inhalants	1	—	1	_	3	_
Narcotic analgesics ³	23	19	15	10	23	_
Other analgesics	9	4	9	3	2	—
Benzodiazepines	14	21	11	9	15	—
Antidepressants	10	12	4	6	7	_
All other substances ³	17	9	13	22	21	1
Total drug deaths	89	91	84	87	74	19
Total drug mentions	197	190	173	176	181	_
Total deaths certified	2,738	2,535	2,511	2,524	2,460	_

St. Louis: St. Louis County, MO



St. Louis County, MO: Deaths and population, 2000					
Deaths involving drug abus	e				
Total	116				
Drug-induced	35				
Drug-related	81				
Total deaths certified	4,427				
Population (2000)	1,016,315				

ex	1	Age	1	Race/Ethnicity	
Male	79	6-17	5	White	9
Female	37	18-24	14	Black	2
		25-34	17	Hispanic	_
		35-44	43	All others	_
		45-97	37		



		Sex				Age	!	
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	25%	28%	19%	_	21%	18%	35%	22%
Number of drugs involve	d							
Single-drug	34%	35%	32%	60%	36%	18%	33%	41%
Multi-drug	66%	65%	68%	40%	64%	82%	67%	59%
Cause of death								
Drug-induced	30%	35%	19%	20%	50%	53%	30%	14%
Drug-related	70%	65%	81%	80%	50%	47%	70%	86%
Manner of death								
Suicide	27%	28%	24%	40%	21%	41%	19%	30%
Accidental/unexpected	41%	48%	27%	20%	71%	29%	40%	41%

24%

All others

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	33	21	27	33	29	_
Cocaine	13	12	15	15	13	4
Heroin/morphine	8	8	15	22	25	4
Marijuana	26	11	12	23	23	10
Amphetamines	_	_	1	_	2	_
Methamphetamine	_	_	3	1	1	_
Club drugs ¹	_	_	_	1	_	_
Hallucinogens ²	_	_	_	1	1	_
Inhalants	1	3	1	3	1	_
Narcotic analgesics ³	32	24	20	31	33	1
Other analgesics	34	18	22	25	21	1
Benzodiazepines	25	20	19	24	22	2
Antidepressants	18	11	22	24	26	2
All other substances ³	36	20	19	46	61	16
Total drug deaths	114	74	81	116	116	40
Total drug mentions	226	148	176	249	258	_
Total deaths certified	4,174	4,279	4,280	4,420	4,427	_

29%

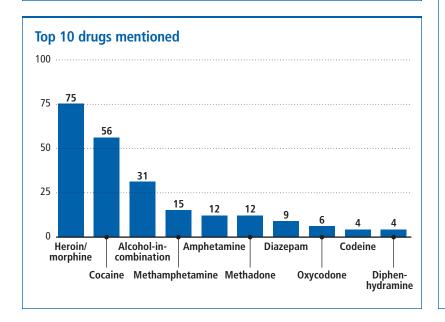
42%

Salt Lake City: Salt Lake County, UT



Salt Lake County, UT Deaths and populati	
Deaths involving drug abuse	!
Total	117
Drug-induced	109
Drug-related	8
Total deaths certified	688
Population (2000)	898,387

Sex		Age	1	Race/Ethnicity	
Male	89	6-17	_	White	90
Female	25	18-24	7	Black	2
		25-34	36	Hispanic	17
		35-44	43	All others	8
		45-97	31	• • • • • • • • • • • • • • • • • • • •	



		9	Sex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	26%	30%	12%	_	14%	14%	28%	42%
Number of drugs involve	d							
Single-drug	25%	25%	20%	_	14%	36%	16%	26%
Multi-drug	75%	75%	80%	—	86%	64%	84%	74%
Cause of death								
Drug-induced	93%	94%	92%	_	100%	94%	95%	87%
Drug-related	7%	6%	8%	—	·····	6%	5%	13%
Manner of death								
Suicide	15%	11%	28%	_	43%	14%	14%	13%
Accidental/unexpected	3%	2%	4%	—	·····	····	2%	6%
All others	82%	87%	68%	—	57%	86%	84%	81%

Drug category	1996	1997	1998	1999	2000	Single-dru deaths, 2000
Alcohol-in-combination	21	27	28	30	31	_
Cocaine	35	43	74	74	56	6
Heroin/morphine	40	65	79	87	75	13
Marijuana	2	2	1	1	-	_
Amphetamines	5	7	14	23	12	_
Methamphetamine	6	10	21	23	15	1
Club drugs ¹	_	_	_	1	2	1
Hallucinogens ²	—	_			1	—
Inhalants	1	_		1	_	—
Narcotic analgesics ³	17	16	13	24	30	8
Other analgesics		1	2		3	—
Benzodiazepines	5	6	5	7	12	—
Antidepressants	4	17	2	7	8	_
All other substances ³	13	10	9	7	9	_
Total drug deaths	66	95	112	138	117	29
Total drug mentions	149	204	248	285	254	_
Total deaths certified	738	717	695	731	688	_

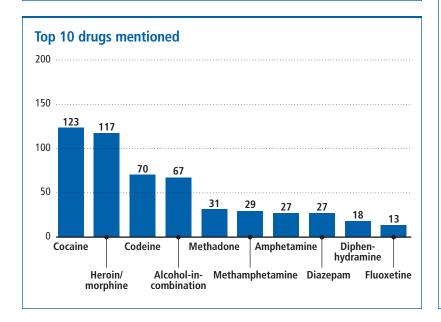
San Francisco: San Francisco County, CA



San Francisco County Deaths and population	
Deaths involving drug abuse	<u> </u>
Total	217
Drug-induced	14
Drug-related	76
Total deaths certified	1,375
Population (2000)	776,733

All others

ex		Age		Race/Ethnicity	
Male	181	6-17	_	White	140
Female	35	18-24	11	Black	48
		25-34	34	Hispanic	13
		35-44	73	All others	10
		45-97	99	•••••	



			Sex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	31%	34%	14%	_	27%	38%	27%	31%
Number of drugs involve	d							
Single-drug	14%	13%	17%	_	_	12%	11%	18%
Multi-drug	86%	87%	83%	_	100%	88%	89%	82%
Cause of death								
Drug-induced	65%	67%	54%	_	91%	56%	67%	64%
Drug-related	35%	33%	46%	_	9%	44%	33%	36%
Manner of death								
Suicide	14%	14%	14%	_	_	18%	8%	19%
Accidental/unexpected	61%	64%	49%	—	91%	50%	64%	59%

23%

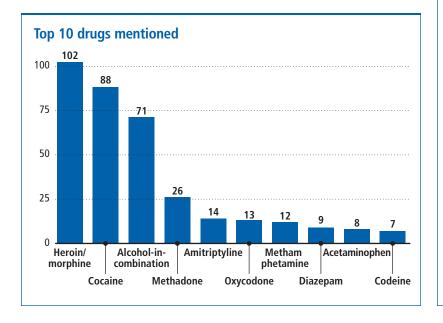
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	116	88	88	112	67	_
Cocaine	133	104	137	139	123	17
Heroin/morphine	168	123	145	166	117	5
Marijuana	1	_	_	_	_	_
Amphetamines	2		28	35	27	_
Methamphetamine	37	40	41	51	29	1
Club drugs ¹	—	4	1	5	6	_
Hallucinogens ²	1	1	1	3	_	_
Inhalants	2		_		1	_
Narcotic analgesics ³	135	123	150	159	128	_
Other analgesics	13	12	7	4	14	1
Benzodiazepines	48	43	46	38	39	_
Antidepressants	69	24	33	75	58	1
All other substances ³	93	88	82	90	76	5
Total drug deaths	297	227	253	287	217	30
Total drug mentions	818	650	759	877	685	_
Total deaths certified	1,722	1,645	1,636	1,539	1,375	_

Seattle: King County, WA



King County, WA: Deaths and populati	ion, 2000
Deaths involving drug abus	e
Total	215
Drug-induced	215
Drug-related	
Total deaths certified	1,316
Population (2000)	1,737,034

ex		Age	1	Race/Ethnicity	
Male	156	6-17	1	White	17
Female	59	18-24	16	Black	2
		25-34	39	Hispanic	1
		35-44	79	All others	1
		45-97	80		



	TOTAL	9	Sex			Age		
		Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	33%	38%	20%	_	38%	26%	37%	33%
Number of drugs involve	d							
Single-drug	32%	33%	29%	100%	50%	33%	28%	31%
Multi-drug	68%	67%	71%		50%	67%	72%	69%
Cause of death								
Drug-induced	100%	100%	100%	100%	100%	100%	100%	100%
Drug-related	—	_	—		—	—	—	
Manner of death								
Suicide	12%	7%	25%	_	13%	8%	9%	18%
Accidental/unexpected	78%	85%	59%	100%	75%	82%	81%	74%
All others	10%	8%	15%	<u> </u>	13%	10%	10%	9%

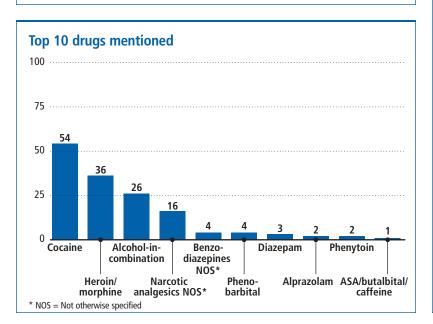
Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	85	74	95	61	71	_
Cocaine	73	65	68	76	88	29
Heroin/morphine	133	110	142	117	102	15
Marijuana	—		1		1	_
Amphetamines	1	2		1	1	_
Methamphetamine	3	3	3	28	12	3
Club drugs ¹	—			1	2	_
Hallucinogens ²	—	_	_	_	—	_
Inhalants	—		_		1	_
Narcotic analgesics ³	30	31	49	21	53	9
Other analgesics	18	20	11	13	21	6
Benzodiazepines	24	26	37	15	20	1
Antidepressants	38	40	63	48	59	4
All other substances ³	28	34	50	36	34	2
Total drug deaths	209	169	215	199	215	69
Total drug mentions	433	405	519	417	465	_
Total deaths certified	1,341	1,306	1,317	1,267	1,316	-

Washington, DC: District of Columbia



District of Columbia: Deaths and population, 2000 Deaths involving drug abuse 100 Drug-induced 73 27 Drug-related Total deaths certified 1,751 Population (2000) 572,059

Sex	1	Age		Race/Ethnicity		
Male	64	6-17	1	White	1	
Female	36	18-24	3	Black	8	
		25-34	10	Hispanic		
		35-44	33	All others	_	
		45-97	53			



Drug involvement in death by sex and age of decedent Age 25-34 35-44

Drug mentions by drug category

Alcohol involved	26%	33%	14%	_	_	40%	30%	23%
Number of drugs involved	I							
Single-drug	52%	41%	72%	100%	67%	40%	48%	55%
Multi-drug	48%	59%	28%	—	33%	60%	52%	45%
Cause of death								
Drug-induced	73%	77%	67%	_	67%	70%	85%	68%
Drug-related	27%	23%	33%	100%	33%	30%	15%	32%
Manner of death								
Suicide	6%	8%	3%	100%	33%	10%	_	6%
Accidental/unexpected	73%	81%	58%	_	67%	80%	76%	72%
All others	21%	11%	39%	—	····	10%	24%	23%

45-97

Drug category	1996	1997	1998	1999	2000	Single-dru deaths, 2000
Alcohol-in-combination	28	29	44	37	26	_
Cocaine	57	33	63	64	54	23
Heroin/morphine	35	41	53	41	36	14
Marijuana	—	_	_		1	_
Amphetamines	—	_	_		1	1
Methamphetamine	—	_	1		1	_
Club drugs ¹	1	_	_		_	_
Hallucinogens ²	2	1	_	2	1	_
Inhalants	—	_	_		_	_
Narcotic analgesics ³	6	6	22	15	20	6
Other analgesics	1	2	3	3	2	1
Benzodiazepines	4	13	13	11	10	3
Antidepressants	3	4	14	11	4	1
All other substances ³	11	7	30	18	10	3
Total drug deaths	87	79	145	121	100	52
Total drug mentions	148	136	243	202	166	-
Total deaths certified	1.543	1.414	1.607	1.763	1.751	

Washington, DC: Montgomery County, MD



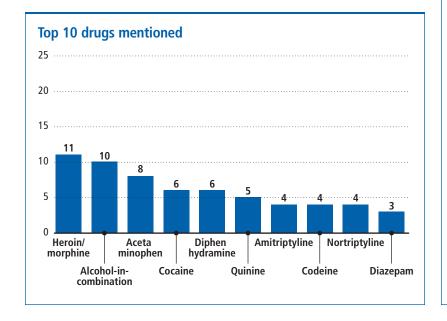
Montgomery County, Deaths and population	
Deaths involving drug abuse	
Total	34
Drug-induced	30
Drug-related	4
Total deaths certified	434
Population (2000)	873,341

All others

65%

73%

ex		Age		Race/Ethnicity	
Male	22	6-17	1	White	2
Female	12	18-24	1	Black	!
		25-34	6	Hispanic	
		35-44	14	All others	
		45-97	12		



Drug involvement in death by sex and age of decedent Sex Age TOTAL Male **Female** 6-17 18-24 25-34 35-44 45-97 Alcohol involved 29% 41% 8% 33% 36% 25% Number of drugs involved Single-drug 24% 14% 42% 100% 50% 7% 25% Multi-drug 76% 86% 58% 100% 50% 93% 75% Cause of death 79% Drug-induced 88% 82% 100% 100% 100% 83% 100% Drug-related 12% 18% 17% 21% Manner of death Suicide 29% 21% 18% 50% 100% 50% 25% Accidental/unexpected 14%

50%

Drug category	1996	1997	1998	1999	2000	Single-dru deaths, 2000
Alcohol-in-combination	8	14	8	8	10	_
Cocaine	8	12	5	9	6	—
Heroin/morphine	16	13	9	13	11	_
Marijuana	—				2	2
Amphetamines	_	1	_	_	_	
Methamphetamine	_	1	_	2	_	_
Club drugs ¹	_	_	_	_	_	_
Hallucinogens ²	1	_	_	_	1	1
Inhalants	_	_	_	_	_	_
Narcotic analgesics ³	11	13	9	11	18	1
Other analgesics	3	9	3	9	9	—
Benzodiazepines	2	7	3	4	5	1
Antidepressants	11	16	8	12	18	1
All other substances ³	18	32	12	27	21	2
Total drug deaths	22	32	18	26	34	8
Total drug mentions	78	118	57	95	101	_
Total deaths certified	475	524	473	500	434	—

100%

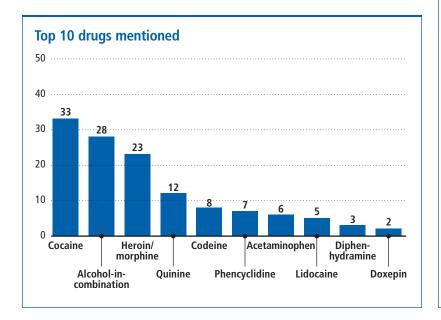
64%

Washington, DC: Prince George's County, MD



Prince George's Could Deaths and population	
Deaths involving drug abuse	.
Total	54
Drug-induced	34
Drug-related	20
Total deaths certified	890
Population (2000)	801,515

ex		Age		Race/Ethnicity		
Male	41	6-17	_	White	2	
Female	13	18-24	6	Black	2	
		25-34	11	Hispanic		
		35-44	24	All others		
		45-97	13			



		S	ex			Age		
	TOTAL	Male	Female	6-17	18-24	25-34	35-44	45-97
Alcohol involved	52%	56%	38%	_	50%	45%	50%	62%
Number of drugs involve	d							
Single-drug	15%	15%	15%	_	33%	18%	13%	8%
Multi-drug	85%	85%	85%	—	67%	82%	88%	92%
Cause of death								
Drug-induced	63%	61%	69%	_	33%	55%	75%	62%
Drug-related	37%	39%	31%	—	67%	45%	25%	38%
Manner of death								
Suicide	15%	15%	15%	_	33%	18%	8%	15%
Accidental/unexpected	19%	24%	—	<u> </u>	50%	9%	13%	23%
All others	67%	61%	85%	<u> </u>	17%	73%	79%	62%

Drug category	1996	1997	1998	1999	2000	Single-drug deaths, 2000
Alcohol-in-combination	18	20	28	24	28	_
Cocaine	29	24	39	15	33	4
Heroin/morphine	24	32	31	23	23	
Marijuana		—	_	_	—	_
Amphetamines		—	_	_	—	_
Methamphetamine	_	—	_	1	—	_
Club drugs ¹		—			1	_
Hallucinogens ²	6	2	3	2	7	3
Inhalants		—			—	_
Narcotic analgesics ³	15	16	15	8	13	_
Other analgesics	8	6	4	5	6	1
Benzodiazepines	4	9	3		—	_
Antidepressants	18	16	8	10	8	_
All other substances ³	62	45	47	31	28	_
Total drug deaths	59	54	59	42	54	8
Total drug mentions	184	170	178	119	147	_
Total deaths certified	1,007	982	1,231	1,265	890	_

APPENDIX A: DAWN MEDICAL EXAMINER REPORT FORM

DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLIC HEALTH SERVICE

FORMAPPROVED: OMBNO 0950-0075 Expires: 11/50/2002

XXXXXXX

SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION

(Sample Form Only)

DRUG ABUSE WARNING NETWORK (DAWN) MEDICAL EXAMINER REPORT

(Sample Form Only)

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	B.1 If not drug induced, please selections of the following DRUG-RELATED CASE categories:							Uni	known								06								
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APPENDIX B: GLOSSARY OF TERMS

This glossary defines terms used by the Drug Abuse Warning Network (DAWN), in data collection activities, analyses and publications. DAWN collects data and publishes findings separately for emergency departments (EDs) and death investigation jurisdictions. As a result, there are a number of terms that are unique to each component of DAWN.

This Appendix is divided into three sections. The first section contains terms common to both the ED component and the mortality data component of DAWN. The second section focuses on terms specific to the DAWN ED system, while the third section focuses on terms specific to the mortality data system.

Definitions of Terms Common to DAWN's ED and Mortality Components

Drug abuse: The nonmedical use of a substance for any of the following reasons: psychic effect, dependence, or suicide attempt/gesture. In DAWN, nonmedical use means:

- the use of prescription drugs in a manner inconsistent with accepted medical practice;
- the use of over-the-counter drugs contrary to approved labeling; or
- the use of any substance (e.g., heroin, marijuana, peyote, glue, aerosols) for psychic effect, dependence, or suicide.

Drug category: A generic grouping of substances reported to DAWN, based on the classification of generic drugs by Multum Information Services. Multum Information Services is a subsidiary of the Cerner Corporation and a developer of clinical drug information systems and a drug knowledge base. More information is available at http://www.multum.com. The DAWN system has accumulated a vocabulary of thousands of substance names that have been mentioned in incidents of abuse. This vocabulary is updated monthly by the inclusion of new abuse substances and, through receipt of identifying information, the reclassification of drugs. Occasionally, this reclassification may result in a drug being shifted to a different drug grouping. The DAWN drug groupings are periodically reviewed in order to reflect the most recent changes in pharmaceutical classifications and drug legislation. Occasional changes in drug classification should be taken into consideration when comparing drug data from this publication with other DAWN publications. These classifications may involve street names and brand names, which are sometimes used to identify a substance and its generic drug group. Individual drugs comprising the most commonly reported drug categories can be found in Tables 2.3 to 2.7 of *Emergency Department Trends from DAWN*.

Additional clarification is provided for the following drug categories:

- Alcohol-in-combination DAWN does not gather data on alcohol used alone, only alcohol used concomitantly
 with another abused substance. Therefore, all alcohol mentions are combination mentions.
- Club drugs During the 1990s, use of certain illicit drugs was linked to "raves" and dance clubs. These substances are commonly referred to as "club drugs." When used in DAWN, the term "club drugs" includes Ketamine, flunitrazepam (Rohypnol), gamma-hydroxy butyrate (GHB, or its precursor, gamma butyrolactone

- [GBL]), and methylenedioxymethamphetamine (MDMA or Ecstasy). Although commonly used in the rave scene, methamphetamine and hallucinogens are classified separately from club drugs in DAWN.
- Drug unknown "Drug unknown" may be recorded when drug abuse was known or suspected to have been involved, but the specific substance could not be determined.
- Heroin and Heroin/morphine This is the only drug classified differently in the ED and mortality components of DAWN. In the ED publications, heroin is classified as a major substance of abuse, separate from morphine, which is classified as a narcotic analgesic under central nervous system (CNS) agents. In the mortality data publications, heroin and morphine are classified together in a single category. When heroin is ingested, it is metabolized to morphine, so that the toxicology testing commonly used in death investigations often does not distinguish between the two. Therefore, a mention of either substance is recorded as heroin/morphine. A case mentioning both heroin and morphine will be "de-duplicated" and counted as a single heroin/morphine mention.
- Inhalants This category includes anesthetic gases and psychoactive nonpharmaceutical substances for which the documented route of administration was inhaled, sniffed, or snorted. Psychoactive nonpharmaceuticals fall into one of the following 3 categories: (1) volatile solvents-adhesives (model airplane glue, rubber cement, household glue), aerosols (spray paint, hairspray, air freshener, deodorant, fabric protector), solvents and gases (nail polish remover, paint thinner, correction fluid and thinner, toxic markers, pure toluene, cigar lighter fluid, gasoline, carburetor cleaner, octane booster), cleaning agents (dry cleaning fluid, spot remover, degreaser), food products (vegetable cooking spray, dessert topping spray such as whipped cream, whippets), and gases (butane, propane, helium); (2) nitrites-amyl nitrites ("poppers," "snappers") and butyl nitrites ("rush," "locker room," "bolt," "climax," "video head cleaner"); or (3) chlorofluorohydrocarbons (Freons). Anesthetic gases (e.g., nitrous oxide, ether, chloroform) are presumed to have been inhaled.
- Major Substances of Abuse We use this term to refer to the most commonly abused drugs (e.g., alcohol-in-combination and cocaine) and those drugs that are typically referred to as "illicit."
- Other Substances of Abuse We use this term to refer to pharmaceutical agents not included in the Major Substances of Abuse.

Drug mention: This refers to a substance that was recorded ("mentioned") in a DAWN case report. In addition to alcohol-in-combination, up to 4 substances ("mentions") can be reported for each ED episode, and up to 6 substances can be reported for each drug abuse death. Therefore, the total number of drug mentions exceeds the total number of ED visits or deaths. Even when only one drug is mentioned, it should not be assumed that the substance was the sole and direct cause of the episode or death; allowances should be made for reportable drugs not mentioned or other contributory factors. (See also **Single-drug episode/death.**)

Metropolitan area: An area comprising a relatively large core city or cities and the adjacent geographic areas.

Conceptually, these areas are integrated economic and social units with a large population nucleus. The current DAWN ED sample, which was redesigned in the 1980s, is based on the definitions of Metropolitan Statistical Areas (MSAs) and Primary Metropolitan Statistical Area (PMSAs) issued by the Office of Management and Budget (OMB) in 1983, with a few exceptions. Metropolitan areas represented in the DAWN mortality data system are consistent with those represented in the DAWN emergency department system, also with a few exceptions. Users of DAWN should note that the emergency department component provides estimates for each of the 21 metropolitan areas. However, in the mortality data component, only raw counts are provided, and in many instances less than 100% of the MSA is represented in those counts.

Not otherwise specified (NOS): Catch-all category for substances that are not specifically named in the listing. Terms are classified into an NOS category only when assignment to a more specific category is not possible based on information in the source documentation (ED patient charts and death investigation case files).

Not tabulated above (NTA): Designation used when categories are not presented in complete detail; smaller units are combined in the NTA category.

Race/ethnicity: Beginning in January 2000, the race and ethnicity categories collected on DAWN case report forms changed to match a change in the standard protocol issued by the Office of Management and Budget in 1997.⁹ The new protocol permits separate reporting of race and Hispanic ethnicity; the ability to capture more than one race for an individual; modifications in nomenclature (e.g., "Black" was changed to "Black or African American"); division of certain categories ("Asian or Pacific Islander" was split into 2 categories, "Asian" and "Native Hawaiian or Other Pacific Islander"); and elimination of the "Other" category.

The race/ethnicity categories on the DAWN data collection forms are as follows:

Race

- White A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- Black or African American A person having origins in any of the black racial groups of Africa.
- American Indian or Alaska Native A person having origins in any of the original peoples of North and South America (including Central America), and who maintains tribal affiliation or community attachment.
- Asian A person having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.
- Native Hawaiian or Other Pacific Islander A person having origins in any of the original peoples of Hawaii,
 Guam. Samoa, or other Pacific Islands.
- *Unknown* Used when documentation of race is not available from source records.

Ethnicity

- *Hispanic or Latino* A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.
- *Not Hispanic or Latino* Ethnicity does not meet the definition of Hispanic or Latino.
- *Unknown* Used when documentation of ethnicity is not available from source records.

Despite the increased detail allowed by the new categories, the actual race/ethnicity data <u>reported</u> to DAWN changed very little because race and ethnicity are often not documented with this level of specificity in patient/decedent records. As a result, we have retained the classification used previously to tabulate DAWN data. The one exception is that we now collapse the less commonly used categories into a category termed "Not tabulated above (NTA)" instead of "Other." Categories used to tabulate race and ethnicity data in the ED publications are:

⁹ See Office of Management and Budget, *Revisions to the Standards for the Classification of Federal Data on Race and Ethnicity, Federal Register*, 62 FR 58782, October 30, 1997.

- White Anyone meeting the definition of white (above). Those who are identified as white and Hispanic are classified as Hispanic.
- Black Anyone meeting the definition of black or African American (above). Those who are identified as black
 or African American and Hispanic are classified as Hispanic.
- Hispanic Anyone whose ethnicity is Hispanic or Latino is placed in the category Hispanic, regardless of race.
- Race/ethnicity not tabulated above (NTA) This includes those categories that are too small to report
 independently including: two or more races, American Indian or Alaska Native, Asian, Native Hawaiian or Other
 Pacific Islander.
- Unknown Race and ethnicity are unknown. Those who are identified only as Hispanic are classified as
 Hispanic.

In *Mortality Data from DAWN*, race/ethnicity data are tabulated as White, Black, Hispanic, and All others, where "All others" includes other reported races and ethnicities as well as unknown or missing data.

Route of drug administration: DAWN reporters are asked to record the method by which the substance was taken into the drug abuser's body according to the following categories:

- Oral Substance was ingested through the mouth (swallowed).
- Injection Substance entered the body through a vein (intravenously), into the muscle (intramuscularly), or under the skin (subcutaneously).
- Inhaled Gases or fumes of a substance were taken into the body by inhaling through the nose or mouth into the lungs (e.g., inhaling the fumes of glue, aerosols, paints, gasoline).
- Smoked (includes freebase) Substance was consumed by smoking a cigarette, pipe, or similar device.
- Sniffed/snorted Substance, acquired in a powder or crystalline form, was forcefully inhaled through the nose.
- Other This category is used when the route of administration of the substance cannot logically be included as any of the above.

Readers should note that this information is often not documented in patient/decedent files and is therefore missing in DAWN tabulations. Caution should therefore be exercised in interpreting this information.

Single-drug episode/death: A single-drug episode or death is that in which only one drug was involved. Because multiple substances may be recorded for each DAWN case (see **Drug mention**), readers should exercise caution in interpreting the relationship between a given drug and the number of associated ED visits or deaths. For example, if records for a given patient "mentioned" marijuana, this does not mean that marijuana was the only drug involved in the ED visit or that the marijuana caused the ED visit. One should always consider whether and how many other drugs were used in combination, but even then attributing a causal relationship between the visit and a particular drug may not be possible. Additionally, because alcohol is only documented if used in combination with another drug, DAWN cannot provide single-drug episode/death totals for alcohol.

Definitions of Terms for the DAWN ED Component

Coterminous U.S.: The contiguous 48 continental States and Washington, DC. Excludes Alaska and Hawaii. National estimates from DAWN refer only to the coterminous U.S.

Disposition of ED patient: Suggestions or recommendations made or actions taken by the hospital as they relate to the patient's presenting problem:

- Treated and released or referred The patient was given appropriate ED treatment and was released or, after appropriate ED treatment, the hospital referred the patient to another agency or to a private physician for additional services.
- Admitted to hospital The patient was admitted as an inpatient to a hospital.
- Left against medical advice The patient left the treatment setting without a physician's approval.
- *Died* The patient expired.

Drug abuse episode: A reported ED visit that involved drug abuse. Episodes involving patients under the age of 6 or over the age of 97 are not reported to the DAWN system. The number of ED patients in DAWN is not synonymous with the number of patients involved. One patient may make repeated visits to an ED or to several EDs, thus producing a number of episodes. It is impossible to determine the number of unique patients involved in the reported ED episodes because no patient identifiers are collected.

Drug concomitance: This term refers to whether a drug abuse episode involved a single drug (one mention) or multiple drugs (multiple mentions).

Drug use motive: DAWN classifies ED drug abuse episodes according to one or more of the following reasons for taking a substance(s):

- Psychic effects A conscious action to use drugs to improve or enhance any physical, emotional, or social situation or condition. Two categories of psychic effect are:
 - Use of drugs for experimentation or to enhance a social situation (e.g., curiosity, peer pressure, "just wanted to know what it felt like," "wanted to have fun," "to get high," "for kicks," "to party"); and
 - Use of drugs to improve or enhance any mental, emotional, or physical state (e.g., depression, anxiety, to relieve headache, reduce pain, stay awake, lose weight, relax, help study, get to sleep).
 Referred to in DAWN as "other psychic effects."
- Dependence A physiological or psychological condition characterized by a compulsion to take the drug on a
 continuous or periodic basis in order to experience its effects or to avoid the discomfort of its absence (e.g.,
 had to take, had to have, needed a fix).
- Suicide attempt or gesture Successful or unsuccessful action(s) taken for the purpose of self destruction or to gain attention.
- Other reason Used when the reason for taking the substance cannot be classified into the categories above.

Estimate: A statistical estimate is the value of a parameter (such as the number of drug-related ED episodes) for the universe that is derived by applying sampling weights to data from a sample. DAWN produces representative statistical estimates for 21 metropolitan areas based on data from a sample of EDs in each of the 21 areas. An estimate for the coterminous U.S. is produced by summing estimates for the 21 metropolitan areas and an estimate for the National Panel.

Form in which drug was acquired: The form in which the substance was received by the user/abuser, not the form in which the substance was consumed. Categories are: tablet/capsule/pill, aerosol, liquid, powder/crystal, paper,

pieces/chunks, injectable liquid, cigarette, plant material, unknown, and other. Readers should note that this information is often not documented in ED records and is therefore missing in DAWN tabluations. Caution should therefore be exercised in interpreting this information.

Hospital emergency department (ED): Only hospitals that meet eligibility criteria for DAWN are recruited to participate. To be eligible, hospitals must be non-Federal, short-stay, general medical and surgical facilities with EDs that are open 24 hours a day, 7 days a week, and located in the coterminous U.S. Specialty hospitals; hospital units of institutions; long-term care facilities; pediatric hospitals; hospitals operating part-time emergency departments; hospitals in Alaska and Hawaii; and hospitals operated by the Veterans Health Administration and the Indian Health Service are excluded.

National Panel: This term is used to denote 2 concepts relative to DAWN ED data: (1) The universe of eligible hospitals outside the 21 DAWN metropolitan areas but within the coterminous U.S. and (2) The sample of hospitals in DAWN that were selected from this universe. The National Panel sample is weighted to produce estimates for the National Panel universe. (See also Metropolitan area.)

p-value: The probability value is the actual probability associated with a statistical estimate; this is then compared with the significance level to determine whether that value is statistically significant. For a statistically significant result, the p-value must be less than or equal to the significance level. The traditional significance levels are *p* less than 0.001, 0.01, 0.05, and 0.10. A result with a p-value less than 0.05 is considered statistically significant in DAWN ED publications.

Population: See **Universe**.

Precision: The extent to which an estimate agrees with its mean value in repeated sampling. The precision of an estimate is measured inversely by its standard error (SE) or relative standard error (RSE). In DAWN publications, estimates with an RSE of 50 percent or higher are regarded as too imprecise to be published. ED table cells where such estimates would have appeared contain the symbol "..." (3 dots). (See also Relative standard error.)

Rank: A rank indicates the relative frequency of a measure, such as mentions for a particular drug category. For example, a drug category ranked second indicates that it accounted for the second highest number of mentions among all drug categories. When 2 or more drugs receive equal numbers of mentions, they are assigned the same rank. A difference in rank should be considered only as indicative of a difference in frequency among drugs reported to DAWN, regardless of the size of the difference. Such differences are not necessarily meaningful or statistically significant.

Reason for present ED contact: The reason for the patient's visit to the ED, based on documentation provided in the medical record. Categories are:

- Overdose/toxic ingestion Either intentional or accidental (e.g., effects of suicide attempt, coma). Anyone
 whose reason for contact is overdose is placed in this category, regardless of other reasons.
- Unexpected reaction The drug's effect was different than anticipated, thus causing concern (e.g., bad trip, panic, hallucinations).

- Withdrawal Symptoms which occur when a patient stops taking a substance upon which she/he is physiologically dependent and suffers physical symptoms, including abdominal pain, cold sweat, hyperactivity, and tremors that require treatment.
- Chronic effects Secondary conditions resulting from habitual use or dependence, including malnutrition, tetanus, blood poisoning, and so forth.
- Seeking detoxification Patients with identified problems with chronic substance abuse who seek admission to a detoxification program and receive treatment from emergency department staff. This category was added to the data collection form in 1987. Some hospitals require patients to be processed in the ED prior to admission for detoxification. Caution should therefore be exercised in interpretation of this category and the remaining information.
- Accident/injury Injuries resulting from accidents that were caused by or related to drug abuse. This category
 was added to the data collection form in 1987.
- Other Reasons which cannot be classified into one of the aforementioned categories.

Reason for taking substance: See Drug use motive.

Relative standard error (RSE): A measure of the sampling variability or precision of an estimate defined as the estimate's standard error (SE) expressed as a percentage of the estimate's value. For example, an estimate of 2,000 cocaine mentions with an SE of 200 mentions has an RSE of 10 percent. (See also **Precision** and **Standard error**.)

Sampling: Sampling is the process of selecting a proper subset of elements from the full population so that the subset can be used to make inference to the population as a whole. A probability sample is one in which each element has a known and positive chance (probability) of selection. A simple random sample is one in which each member has the same chance of selection. In DAWN, a sample of hospitals is selected in order to make inference to all hospitals; DAWN uses simple random sampling within strata.

Sampling frame: A list of units from which the ED sample is drawn. All members of the sampling frame have a probability of being selected. A sampling frame is constructed such that there is no duplication and each unit is identifiable. Ideally, the sampling frame and the universe are the same. The sampling frame for the DAWN hospital ED sample is derived from the American Hospital Association (AHA) Annual Survey of Hospitals.

Sampling unit: A member of a sample selected from a sampling frame. For the DAWN sample, the units are hospitals, and data are collected for all drug-related ED episodes at the responding hospitals selected for the sample.

Sampling weights: Numeric coefficients used to derive population estimates from a sample.

Source of substance: The immediate source of the substance that the patient abused is coded as follows:

- Patient's own legal prescription This is coded only when the abuser was legally prescribed the drug of abuse. If one patient obtains a drug by legal prescription and sells it to another who abuses it, the source to the abuser is marked "street buy." If the patient for whom the prescription was issued gives the drug to another patient who abuses it, the source to the abuse is "other unauthorized procurement."
- Street buy The drug abuser purchased a drug and/or prescription from a source other than legitimate channels.

- Other unauthorized procurement The drug was acquired in a manner not consistent with accepted medical
 care but was not bought on the street. This category includes drugs purchased using forged prescriptions,
 stolen, or received as a gift.
- Other Used when the source of the substance cannot logically be included as any of the above. This category
 includes all over-the-counter medications.
- Unknown Reported when information on source was unavailable.

Readers should note that this information is often not documented in ED records and is therefore missing in DAWN tabulations. Caution should therefore be exercised in interpreting this information.

Standard error (SE): A measure of the sampling variability or precision of an estimate. The SE of an estimate is expressed in the same units as the estimate itself. For example, an estimate of 10,000 cocaine mentions with an SE of 500 indicates that the SE is 500 mentions.

Strata (plural), stratum (singular): Subgroups of a population within which separate ED samples are drawn.

Stratification is used to increase the precision of estimates for a given sample size, or, conversely, to reduce the sample size required to achieve the desired level of precision. The DAWN ED sample is stratified into 21 metropolitan area cells plus an additional cell for the National Panel. Then, within these cells strata are defined according to the annual number of ED visits, whether the hospital is located inside or outside the central city of the metropolitan area, and by the presence or absence of an organized outpatient department, alcohol/chemical dependence inpatient unit, or both. The strata are as follows:

Stratum	Annual ED visits	Location within metropolitan area	Outpatient department or alcohol/chemical dependence inpatient unit				
				In the 21 DAWN	I metropolitan areas:		
				0	>80,000	Not applicable	Not applicable
1	<80,000	Central city	Both				
2	<80,000	Central city	One only				
3	<80,000	Central city	Neither				
4	<80,000	Outside Central city	Both				
5	<80,000	Outside Central city	One only				
6	<80,000	Outside Central city	Neither				
In the National	Panel:						
0	>80,000	Not applicable	Not applicable				
7	<80,000	Not applicable	Both				
8	<80,000	Not applicable	One only				
9	<80,000	Not applicable	Neither				

Note: Stratum "0" is defined for each of the 21 metropolitan areas and the National Panel cells. See *Drug Abuse Warning Network Sample Design and Estimation Procedures: Technical Report,* November 1997.

Statistically significant: A difference between 2 estimates is said to be statistically significant if the value of the statistic used to test the difference is larger or smaller than would be expected by chance alone. For DAWN ED estimates, a difference is considered statistically significant if the p-value is less than 0.05. (See also **p-value**.)

Universe: The entire set of units for which generalizations are drawn. The universe for the DAWN ED sample is all non-Federal, short-stay, general medical and surgical hospitals in the coterminous U.S. with EDs open 24 hours a day, 7 days a week. (See also **Coterminous U.S.**).

Definitions of Terms for the DAWN Mortality Component

Cause of death: Cases are reportable to DAWN if the death investigation concludes that the death was either directly or indirectly caused by drug abuse. If a death was directly caused by drug abuse (e.g., a drug overdose), DAWN refers to the death as drug-induced. If drug abuse was a contributing factor in the death, but not the immediate or sole cause, then DAWN refers to the death as drug-related. It is important to note that DAWN data include both types of deaths. It is also important to note that a drug-induced death may involve more than a single drug. (See single-drug episode.)

Certified death: Any case accepted and reviewed by a medical examiner or coroner, who uses information from the death investigation to complete the death certificate.

Consistent panel: DAWN does not impute missing data for jurisdictions that have not reported for all or part of a given year. Therefore, tables and charts showing trends in deaths over time are based on a consistent panel of reporting jurisdictions. A consistent panel includes those jurisdictions that have reported data for at least 10 months of each year reflected in the trend table/chart. The reason for a consistent panel is to ensure that apparent changes over time are not a result of gaps in reporting. Because participating jurisdictions may change from year to year, consistent panels used in published reports will also change from year to year. This means that trends published in one annual report are not necessarily comparable to trends published in subsequent annual reports.

Coroner: Death investigation jurisdictions typically use either a medical examiner system or a coroner system. Unlike medical examiners, coroners need not be physicians; usually the only prerequisite for serving as a coroner is that the individual be more than 18 years of age and a resident of the county or district to be served. Coroners are typically elected rather than appointed. They may have jurisdiction over counties or districts within states. (See also Jurisdiction and Medical examiner.)

Drug combinations: Published tables from the DAWN mortality data refer to "drug combinations" rather than "drug concomitance" (the term used in the ED component). This term refers to multiple drug mentions for a single death, and tables show particular combinations of substances reported for deaths. Readers should note that DAWN cannot differentiate between drugs actually used in combination (simultaneously) and drugs used sequentially.

Drug-induced death: A death directly resulting from drug abuse or other substance abuse, such as drug overdoses or the interactive effects of drug combinations. When more than one drug is mentioned, it cannot be determined which or whether one drug was the sole and direct cause of the episode or death.

Drug-related death: A death in which the abuse of a drug is a contributing factor, but is not the sole cause of death.

Such cases include drug abuse that exacerbates a pre-existing physiological condition; drug abuse in combination with an external physical event (e.g., a fall or automobile accident); or a medical disorder that was itself caused by drug abuse (e.g., hepatitis contracted through injection drug use). Drug-related deaths are classified into two types, confirmed and presumed. The drug-relatedness is "confirmed" if documentation in the decedent's file substantiates that conclusion. The drug-relatedness is "presumed" if the investigation suggests drug involvement, but the medical examiner/coroner has insufficient evidence to list drug abuse as a contributing cause on the death certificate. Both confirmed and presumed deaths are included in the published mortality data tables.

Jurisdiction: DAWN uses the term "jurisdiction" to mean the geographic area for which a medical examiner/coroner's office is responsible. In many states, there is a 1:1 correspondence between jurisdictions and counties. In some states, there are multiple medical examiner/coroner offices within a given county, or there may be multiple counties covered by a "district" that includes one or more medical examiners/coroners. A few states are organized as a single statewide jurisdiction.

Understanding jurisdictions is important because this assists readers in interpreting aggregated data. Published DAWN mortality data are aggregated into metropolitan areas, which often comprise multiple jurisdictions. In some states, there are different death investigation procedures for different jurisdictions (most notably, some jurisdictions have medical examiner systems, while others have coroner systems). There are nearly always some differences in death investigation procedures across states (and notably, some metropolitan areas include jurisdictions in multiple states). Readers should be mindful of these variations when interpreting or comparing data.

Information on death investigation practices and an updated list of jurisdictions throughout the U.S. and Canada are available from the Centers for Disease Control's Epidemiological Program Office at www.cdc.gov/epo/dphsi/mecisp/death_investigation.htm.

Manner of death: This variable is used to describe how the decedent died. It is applicable to both drug-induced and drug-related deaths. On the DAWN data collection form, manner of death is coded into the following categories:

- Accidental/Unexpected Although the drug abuse was deliberate, the resulting death was unintended.
- Suicide Death in which there is evidence that the decedent deliberately used drugs to bring about his/her demise.
- Homicide Death in which the decedent's life was taken by another individual by means of drugs. These cases, which do not involve the intentional abuse of drugs by the decedent, are not currently included in published tabulations of DAWN mortality data.
- Natural Death was due to natural causes such as a medical disorder or disease process, if drug abuse caused
 or worsened the decedent's condition.
- Undetermined The manner of death cannot be determined from all available evidence.

In *Mortality Data from DAWN*, manner of death is collapsed into three categories: suicide, accidental/ unexpected, and "All others." The "All others" category includes cases for which manner of death was recorded as natural, unknown, or undetermined, and cases for which manner of death was missing.

Medical Examiner (ME): Death investigation jurisdictions typically use either a medical examiner system or a coroner system. Most medical examiners are licensed physicians or forensic pathologists, and are generally appointed (rather than elected). They may have jurisdiction over a county, district, or entire state. (See also **Coroner** and **Jurisdiction**.)